

*Bayfield County
Department of Human Services*



Photo by Caitlin Skulan

**2012
Annual Report**

September 2013

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2012 ANNUAL REPORT

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DEPARTMENT OF HUMAN SERVICES 2012 ANNUAL REPORT

FUNCTION

The mission of the Department of Human Services is to protect and improve the quality of life.

MAIN RESPONSIBILITIES

The Department of Human Services is divided into four sections: Aging and Disability Services; Economic Support Services; Family Services; and Support Services. Each section has its own mission and unique set of responsibilities.

The mission of the Aging and Disability Services Section is “to support independent community living by respect of personal choices”. The Aging and Disability Services Section is responsible for a wide range of assessments and services related to disabled and elderly residents of Bayfield County. They also provide information and assistance to the general public regarding local resources available to those who do not qualify for public assistance.

The mission of Economic Support Services is “to assist individuals to achieve economic well-being”. Economic Support is responsible for the eligibility determination for numerous federal, state, and county public assistance programs.

The mission of the Family Services Section is “to provide a safe and stable environment for identified children and families through empowerment and support”. The Family Services Section is responsible for a wide range of assessments and services related to children and families.

The mission of the Support Services Section is “to provide support services in a professional, courteous, and efficient manner.” The Support Services Section provides reception, clerical and accounting support to the entire agency.

ORGANIZATION

The Bayfield County Board of Supervisors voted on November 10, 1998, to develop a Department of Human Services (DHS) uniting the three Departments of Aging, Community Programs and Social Services. The Department of Human Services was officially created on April 1, 1999.

The Human Services Board has primary responsibility for oversight of the Department. The board has nine members, five County Board representatives and four citizen members, whose applications are reviewed by the County Administrator and whose appointments are approved by the County Board Chair. In addition, there are three advisory committees to the board: the Aging and Disability Advisory Committee; the Family Services Advisory Committee; and the Family Support Program Advisory Committee. Each advisory committee includes at least one member of the Human Services Board.

BUDGET

The Department of Human Services initially had an approved 2012 budget of \$5,900,533. This was less than a one percent increase compared to the previous year when \$5,848,892 was budgeted for 2011. The increase in budget was due to the anticipated need to transfer funds held in trust for substance abuse expenses and transportation services to balance the budget.

Of the \$5,900,533 budget, \$1,770,778 or 30% of the budget was county levy. The amount of base county levy in the Human Services budget has not been increased since 2008. From 2008 through 2012, annual decreases in the maintenance of effort paid to the Department of Health Services for Family Care was used to offset increasing costs. The County's decision to maintain the levy but not increase it was in response to the challenging economic environment and mandated tax levy caps. However, the spend down for Family Care will end as of July 1, 2014, so the Department will no longer be able rely on that funding to assist in balancing the budget.

In addition to the Department budget, millions of dollars are paid annually to local vendors and clients. These payments are issued directly by the state of Wisconsin based on eligibility determinations done by Income Northern Income Maintenance Consortia staff. This is important both because the Department is audited on the eligibility determinations and because these dollars enter our local economy.

The budget of the Department of Human Services can fluctuate during the year for any number of reasons. Some circumstances which influenced the 2012 budget included: increasing caseloads; changes in State policy; unanticipated increases in mandated and court ordered services; unanticipated personnel costs; placements in state mental health institutes; and a juvenile corrections facility placement. These all had significant and negative impact on the 2012 budget.

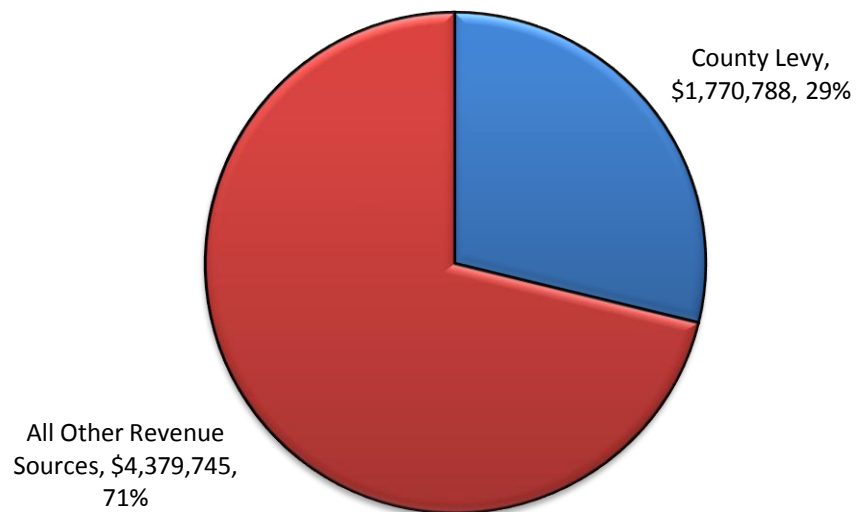
Near the end of the year, the budget was modified and increased by \$525,000 to \$6,150,533. The resolution to increase the budget included both additional revenues and a request to transfer up to \$250,000 from the Department's Risk Reserve fund balance to pay for unanticipated overages. This would have afforded us the opportunity to transfer funding from the risk reserve to cover the deficit.

Preliminary Human Services Board budget reports are attached. They are presented in the format that they were monitored in 2012. The reports may change after reconciliations adjustments are processed and the State and the County's single audit process is complete. Realistically, the Department will be well into the 2014 budget process before the 2012 financial books are closed. Although there are a number of undetermined factors, the initial conclusion is that the Department operated within its modified 2012 budget and that approximately \$140,000 will be transferred from the Risk Reserve Fund to balance the budget.

2012 Budget Summary

<u>Budget</u>	<u>Program</u>	<u>Source</u>
\$ 4,101,629	Purchased Services	State, Federal & County
1,484,058	Provided Services	State, Federal & County
564,846	Support & Overhead	State, Federal & County
\$ 6,150,533		

2012 DHS Budget - County Costs



	Bayfield County	DHS	Percentage
2012 Budget	\$24,411,942	\$6,150,533	25%
2012 Levy	\$8,874,680	\$1,770,788	20%

2012 Public Assistance Benefits Paid Directly

\$	61,035	W-2	State & Federal
	17,245,742	Medical Assistance (incl. SSI - MA)	State & Federal
	2,042,595	FoodShare	State & Federal
	368,776	WHEAP Grants	Federal
	36,616	WHEAP Crisis Assistance	Federal
	84,808	Child Care	State & Federal
	\$19,839,572	Total*	

*Does not appear in the county books. However, these dollars represent funds that are introduced into the local economy. The department is audited and quality control tested on the eligibility determinations of these programs.

Bayfield County Department of Human Services
2012 Budget Monitoring
Final Budget

Expenses	% of Budget	2012 Budget	Expenses	% Used
AMSO		Allocated		
Economic Support Section	6.7%	407,164	378,954	93%
Family Services Section	44.0%	2,703,419	2,720,254	101%
Aging & Disability Section	18.7%	1,150,012	876,870	76%
GWAAR Section	9.1%	562,242	554,261	99%
ADRC-Bayfield	1.2%	72,486	22,042	30%
ADRC-North	16.5%	1,012,381	1,082,039	107%
Regional Crisis Initiative	1.9%	118,800	133,511	112%
Youth Prev. Offender Grant	2.0%	124,030	68,492	55%
Totals	100%	\$ 6,150,533	\$ 5,836,423	95%

Revenues	% of Budget	2012 Budget	Revenues	% Received
ST/FED Revenue:				
State & Federal Revenue	44.9%	2,762,390	2,481,104	90%
State & Fed./CST	0.0%	-	-	
State & Fed/WIMCR	0.0%	-	27,331	
Youth Aids	2.3%	138,492	126,820	92%
C.A.R.E.	0.0%	-	1,955	
W-2 & Childcare	1.4%	85,677	88,602	103%
WHEAP	0.6%	34,327	30,365	88%
GWAAR	4.3%	263,705	271,203	103%
EDS	5.4%	330,834	445,539	135%
IDP	0.3%	20,000	19,155	96%
Comm. Integration Program	0.0%	1,300	1,300	100%
ST/FED Revenue: WJCIA	0.4%	24,999	24,999	100%
Transfer from other funds	0.8%	50,000	58,179	116%
Transfer from Fund Balance		250,000		
Transfer from other funds-2011 Carryover		72,266	72,266	
All Other Revenue	0.0%	-	132	
Youth Prev. Offender Grant	2.0%	124,030	76,750	62%
Other State & Federal Revenue	0.0%	-	-	
Other Revenue:				
Aging & Disabilities	1.5%	92,200	45,094	49%
Family Services	0.8%	48,000	55,051	115%
Economic Support	0.1%	5,100	2,607	51%
AMSO	0.0%	400	396	99%
GWAAR	1.2%	76,025	97,100	128%
County \$:	28.8%	1,770,788	1,770,788	100%
Totals	95%	\$ 6,150,533	\$ 5,696,735	93%

Agency Management Support & Overhead

		Cost Category Description	2012 Budget	Expenses	% Used
		Grand Total	564,846	549,843	97%
Section	FTE	ALLOCATION %			
ES	4.12	19%	109,668	106,756	19%
FS	8.00	38%	212,948	207,292	38%
A & D	2.43	11%	64,683	62,965	11%
GWAAR	3.44	16%	91,568	89,136	16%
ADRC-B	2.23	11%	59,359	57,783	11%
ADRC-N	1.00	5%	26,619	25,912	5%
RCI	0.00	0%	-	-	0%
Totals	21.22	100%	564,846	\$ 549,843	97%

Economic Support

	Cost Category Description	2012 Budget	Expenses	% Used
	Provided Services:			
	Provided Total	265,790	258,240	97%
	Salary & Fringe/Case Mgmt. Offset	-	-	
	AMSO ALLOCATION	109,668	106,756	97%
	Purchased Services:			
	Contracted, supplies, trng., mileage, etc.	13,901	2,397	17%
Sum Suff.	W-2 Emergency Assistance	2,500	2,036	81%
	WHEAP	705	768	109%
Sum Suff.	MA Transportation	500	148	30%
	W-2 Program	3,700	2,917	79%
	W-2 Job Access Loan	-	-	
	IM FSET	400	1,572	393%
	General Relief	10,000	4,120	41%
	Purchased Total	31,706	13,958	44%
	Grand Total	\$407,164	\$378,954	93%
	W-2 Benefit Payments	\$131,047	\$130,048	99%
	(3 year contract)			

Family Services

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total	614,191	603,223	98%
Family Services Match	-	(413)	
Salary & Fringe/Case Mgmt. Offset	-	(10,033)	
AMSO ALLOCATION	212,948	207,292	97%
Purchased Services:			
Coordinated Services Team	-	-	
Contracted, supplies, trng., mileage, etc.	64,600	97,834	151%
Unallowable Costs	-	39,396	
C.A.R.E.	-	1,955	
Juvenile Court Int.	24,999	24,999	100%
Youth Index. Living (Consortium)	53,590	16,964	32%
IV-E	-	-	
Kinship Care	18,292	20,507	112%
Family Based Serv.	-	-	
Domestic Violence Services	15,000	15,000	100%
Community Intervention	1,300	864	66%
AODA Purch. - YA	4,000	2,825	71%
Substitute Care	470,000	443,018	94%
Youth Independent Living-ETV	637	-	0%
Health Check (pass thru)	2,000	5,569	278%
AODA	300,507	286,501	95%
IDP	35,000	18,669	53%
Mental Health	850,304	904,601	106%
Safe & Stable Families	36,050	41,485	115%
Cont. Quality Improvement	-	-	
Purchased Total	1,876,279	1,920,185	102%
Grand Total	\$2,703,419	\$2,720,254	101%

Aging & Disabilities

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total	189,374	188,319	99%
Salary & Fringe/Case Mgmt. Offset	(51,103)	(81,013)	159%
AMSO ALLOCATION	64,683	62,965	97%
Purchased Services:			
Contracted, supplies, trng., mileage, etc.	17,875	19,442	109%
Capital Equipment	-	-	
Protective Placements	103,000	123,482	120%
Patient Plan of Care	-	-	
Supportive Home Care	14,000	11,860	85%
COP	35,273	38,762	110%
Alzheimer Family Support	5,121	5,426	106%
Family Care Allocation Payback	308,645	308,645	0%
AFH Performance	400	-	0%
Family Support	31,684	29,661	94%
Birth to Three	115,000	117,628	102%
Children's Waiver - PD	11,169	3,145	28%
Children's Waiver - DD	92,719	17,526	19%
Children's Waiver - DD, CA-M	-	8,760	
Children's Waiver - DD/Local-Match	10,900	1,662	15%
Children's Waiver - SED	23,272	6,844	29%
Children's Waiver Intensive - DD	72,200	8,324	12%
Children's Waiver Intensive - SED	105,800	5,433	5%
Purchased Total	947,058	706,599	75%
Grand Total	\$1,150,012	\$876,870	76%

GWAAR

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total	187,194	179,444	96%
Salary & Fringe/Case Mgmt. Offset	(3,900)	-	
AMSO ALLOCATION	91,568	89,136	97%
Purchased Services:			
Supplies, Mileage, etc.	4,400	3,304	75%
Capital Equipment	-	-	
Congregate Meals	72,800	72,485	100%
DOT	64,000	55,982	87%
Family Caregiver	3,200	12,193	381%
Home Delivered Meals	130,600	130,980	100%
Preventative Health Services	2,480	377	15%
Home Chore	-	-	
Elder Abuse	9,900	9,905	100%
Transportation	-	-	
EFSNB	-	456	
Purchased Total	287,380	285,682	99%
Grand Total	\$562,242	\$554,261	99%

ADRC-Bayfield

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total	156,627	100,194	64%
AMSO ALLOCATION	59,359	57,783	97%
Offset	(148,901)	(141,494)	95%
Purchased Services:			
Telephone	-	-	
Capital Equipment	-	-	
Office Supplies	-	58	
Postage	-	-	
Printing	-	47	
Publication/Dues/Subscriptions	200	217	108%
Training	800	520	65%
Travel	4,100	4,542	111%
Board	-	123	
Meals	300	53	18%
Purchased Total	5,400	5,560	103%
Grand Total	\$72,486	\$22,042	30%

ADRC-North

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total	70,882	64,124	90%
Salary & Fringe Offset/Fiscal Agent	-	-	
AMSO ALLOCATION	26,619	25,912	97%
Offset	(298,351)	-	0%
Purchased Services:			
Telephone	15,943	16,961	106%
Publications, Dues, Subscriptions	-	1,092	
Capital Equipment	-	1,127	
Contractual Services	97,350	101,889	105%
Direct Services	718,305	848,472	118%
Office Supplies	5,798	1,237	21%
Other Supplies/Software	14,908	13,592	91%
Postage	5,393	40	1%
Printing	16,673	566	3%
Training	11,460	430	4%
Travel	29,260	4,705	16%
Admin	289,141	-	0%
Board	9,000	1,892	21%
Rent & Leases	-	-	
Purchased Total	1,213,231	992,003	82%
Grand Total	\$1,012,381	\$1,082,039	107%

Regional Crisis Initiative

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total			
AMSO ALLOCATION	-	-	
Offset			
Purchased Services:			
Contractual Services	92,000	107,181	117%
Direct Services	-	-	
Office Supplies	300	146	49%
Postage	-	-	
Printing	1,200	305	25%
Training	17,600	18,179	103%
Insurance	-	-	
Meals	-	-	
Admin	7,700	7,700	100%
Purchased Total	118,800	133,511	112%
Grand Total	\$118,800	\$133,511	112%

Youth Prevention Offender Initiative Grant

Cost Category Description	2012 Budget	Expenses	% Used
Provided Services:			
Provided Total			
AMSO ALLOCATION			
Offset			
Purchased Services:			
Contractual Services	62,609	51,232	82%
Direct Services	26,678	7,477	28%
Office Supplies	-	1,000	
Registration/Fees/Tuition	600	-	0%
Capital Equipment	-	-	
Travel	13,207	242	2%
Lodging	420	-	0%
Other Supplies	20,516	8,542	42%
Purchased Total	124,030	68,492	55%
Grand Total	\$124,030	\$68,492	55%

Bayfield County Department of Human Services
January – December 2012
Mandated State 942 Report
May, 2013

	DD	MH	AODA	PHYS DIS	DELINQ	CANS	CHILD/FAM	ELDERLY	TOTAL
	1	2	3	4	5	6	7	8	9
CHILD DAY CARE	-	-	-	-	-	-	-	-	-
SUPPORTIVE HOME CARE	-	20,369	-	12,290	-	-	-	7,958	40,617
SPEC TRANS & ESCORT	574	7,291	4,868	-	-	-	6,768	121,010	140,511
ACCESS, OUTREACH & PREV	1,343	8,150	1,075	217	17,892	-	146,802	18,392	193,871
COMM LIVING/SUPPORT SERV	91,177	117,411	22,925	46,217	-	2,778	53,647	326,357	660,512
INVESTIGATIONS & ASSESSMNT	17,377	104,379	8,697	248	296,715	160,960	53,984	-	642,359
COMM SUPPORT PROGRAM	-	444,541	-	-	-	-	-	-	444,541
WORK-RELATED & DAY SERV	125,487	113,113	160,516	3,662	-	-	595	4,694	408,066
SUPPORTIVE EMPLOYMENT	-	-	-	-	-	-	-	-	-
COMM RESIDENTIAL SERV	-	30,805	7,101	23,493	66,345	13,193	109,255	43,893	294,086
COMMUNITY TREATMENT	-	57,744	88,048	-	7,939	-	595	4,621	158,946
INPATIENT & INSTITUTIONAL CARE	-	378,997	266,214	36,401	375,846	-	22,888	78,677	1,159,024
INSTITUTION FOR MENTAL DISEASE	-	-	-	-	-	-	-	-	-
TOTAL	235,957	1,282,799	559,442	122,529	764,738	176,931	394,534	605,601	4,142,533
Age: Under 18 Years	202,336	310,540	319,560	77,881	764,738	176,931	381,458		2,233,446
Age: 18 Years and Over	33,621	972,259	239,882	44,648	-	-	13,076	605,601	1,909,087
	235,957	1,282,799	559,442	122,529	764,738	176,931	394,534	605,601	4,142,533

SUPPORT SERVICES SECTION

The mission of the Support Services Section is to “provide support services in a professional, courteous and efficient manner.” With that mission in mind, the Support Services Section is responsible for the management of department operations, provision of support services to the other sections, all accounting functions, State reporting requirements, reception services, scanning documents, file maintenance, correspondence, and numerous other duties.

2012 was a year of change for the Department of Human Services. January began with the mandated regionalization of the Income Maintenance Program and the implementation of the Call Change Center. Bayfield, along with Ashland, Iron, Vilas, Forest, Florence, Sawyer, Price, Rusk, Taylor, Lincoln and Wood Counties, formed the Northern Income Maintenance Consortium (NIMC) to deliver Income Maintenance programs. Wood County became the lead fiscal agency. The Department’s Financial Manager assisted the Wood County Financial Manager with the arduous task of developing a regional 100% time reporting tool and various financial reports that were needed for the consortium.

Although there is still a local presence with the delivery of the Income Maintenance, incoming calls and foot traffic in the reception area decreased significantly by February 2012. The Financial Manager and Director considered a reduction of Support Staff. However, due to workload issues with the NIMC staff, a “clerical scheduling” option to the Call Change Center was implemented. This helped reduce the volume of calls and the wait time for the consumers. Bayfield County has committed a .5 full time equivalency employee (FTE) to the clerical Call Change Center. Support Staff underwent training on the state’s Web based Learning Center to prepare for this duty. Before long, five support staff were scheduling appointments and completing electronic signatures for the NIMC.

As the year progressed, modifications were made to better suit the agency needs. The five support staff assigned Call Change Center duties were reduced to three, giving the two other support staff additional time to complete other tasks. The vacant office next to the Financial Manager was converted to the Clerical Call Change Center to provide more privacy for calls and better service. Call Change Center clerical staff was given additional job duties to perform while not taking calls. Assignment of these duties further assisted NIMC to handle the volume of work, it allowed the Department to avoid a reduction in staff, and it secured additional revenues.

With the implementation of the Third Party Administrator (TPA) for the Children’s Long Term Services program (CLTS) in December of 2011, payment to local service providers are no longer processed in the Department. It was a challenge to decipher reports from the TPA and to begin to extract data needed for oversight of the program. Staff worked in conjunction with the State and other counties to extrapolate data to build a report that would provide useful information. This process continued throughout 2012. While there has been some improvement, there is work yet to do to improve the process.

In August, the agency Director and Financial Manager developed the 2013 Annual Budget within parameters established by the County Administrator. This meant that 2013 budget had a zero county levy increase.

The Department's single audit process for fiscal year 2011 was conducted in an efficient manner. Support Services Staff prepared "audit ready" documents for the auditors. The Department continues to enjoy a good working relationship with the auditors. There were no Financial Statement findings.

Though 2012 started out with the same support staff FTE's as in 2011, in December, a seasoned support staff member successfully interviewed for the Assistant County Treasurer position in the Bayfield County Treasurers Office. The transfer took place in January of 2013. The Director and Financial Manager processed a request to fill the vacancy. The request was approved.

Throughout all of the changes that took place in 2012, the Support Staff Section continued to "provide support services in a professional, courteous and efficient manner" with a focus on excellent customer service. After all, "A customer is not an interruption to our work; he/she is the purpose of it".

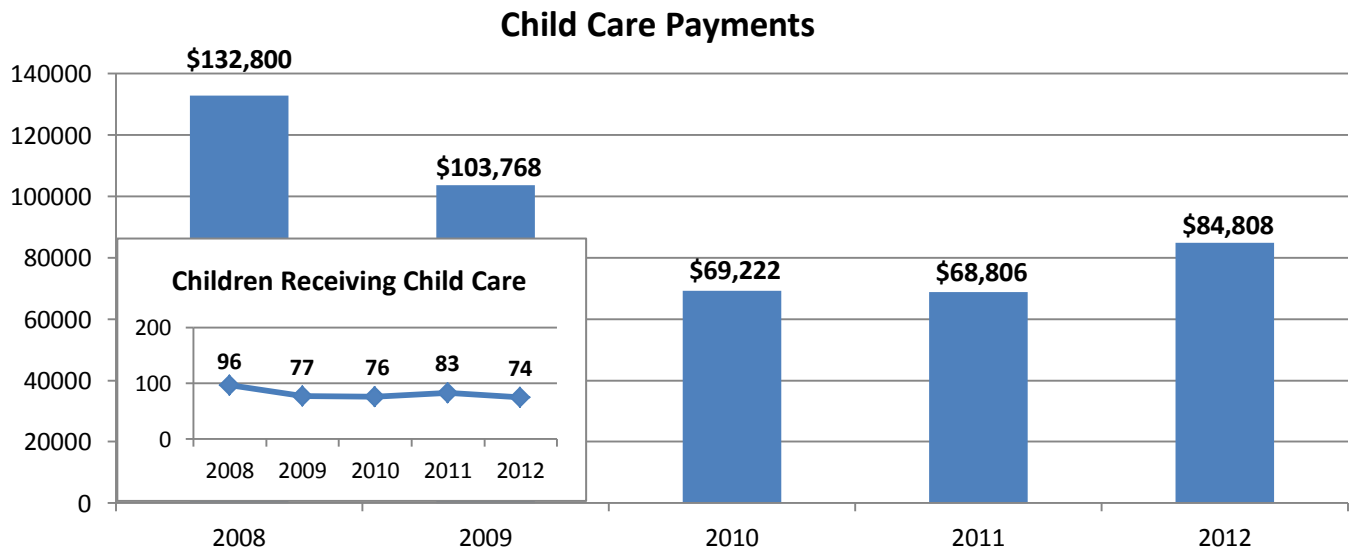
ECONOMIC SUPPORT SERVICES SECTION

Due to the Governor's requirement to regionalize Income Maintenance Programs, in January 2012 the Northern Income Maintenance Consortium (NIMC) was established. Bayfield County partnered with Ashland, Florence, Forest, Iron, Lincoln, Price, Rusk, Sawyer, Taylor, Vilas, and Wood counties to successfully launch regionalized public assistance programs to regional residents. The business model continues to be modified in an ongoing effort to maximize efficiencies and improve customer service.

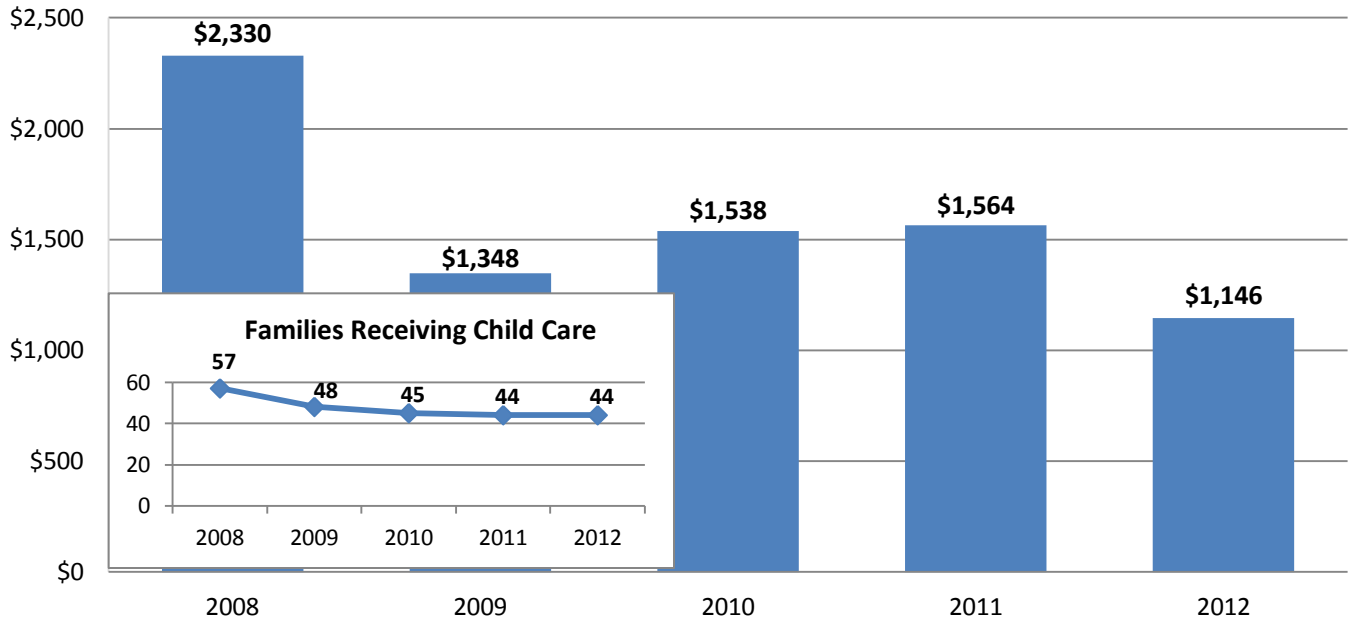
In February a fond farewell was bid to Economic Support Specialist Kay Ross. Kay retired after five years at Bayfield County. Kay had an exceptional commitment to customer service and will be missed. Due to the reductions sustained in state and federal funding when Income Maintenance Programs were regionalized, Kay's position was not filled.

In 2012, two of the three Economic Support workers were primary assigned to the NIMC Call Center. As Call Center Agents, these individuals assist people in the consortium with all aspects of public assistance cases. By the end of 2012, the Call Center for NIMC had answered 98,088 calls.

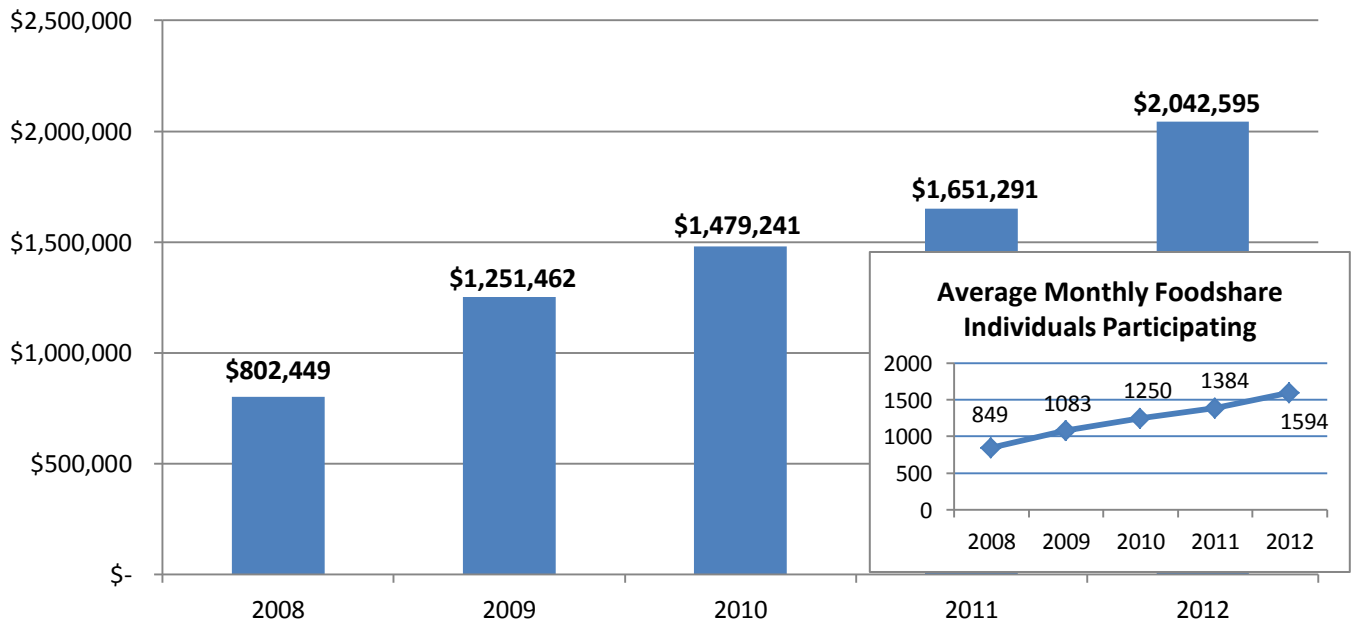
The Wisconsin Works or W-2 Program was expanded in 2012. The Red Cliff Band of Lake Superior Chippewa decided that they would no longer provide Temporary Assistance to Needy Families (TANF) to tribal residents who lived off the Red Cliff reservation. TANF is the federal version of Wisconsin's W-2 Program. This change was made October 1, 2011. As a result, those cases transitioned to the Department's W-2 Program and caseloads and participation were high the last quarter of 2012. We were short-staffed for much of the summer due to a staff medical leave. However, we were able to maintain the program. In July, the State decided that the W-2 Program would be regionalized in 2013. The bid for the region including Bayfield County was awarded to a private provider. In late 2012, the Department began to work with the Workforce Resources Inc. to facilitate a smooth and seamless transition of client beginning January 1, 2013. It was a wonderful and challenging year. There were many successes in 2012 and a tremendous amount learned along with way.



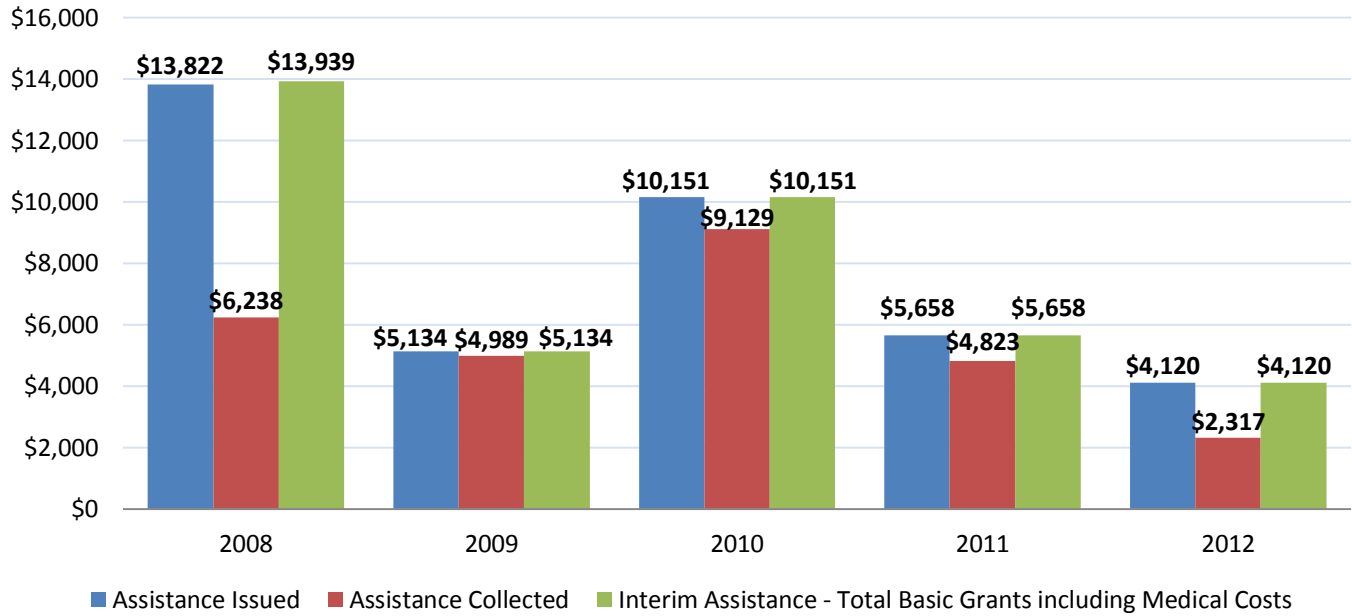
Average Child Care Paid Per Family Per Year



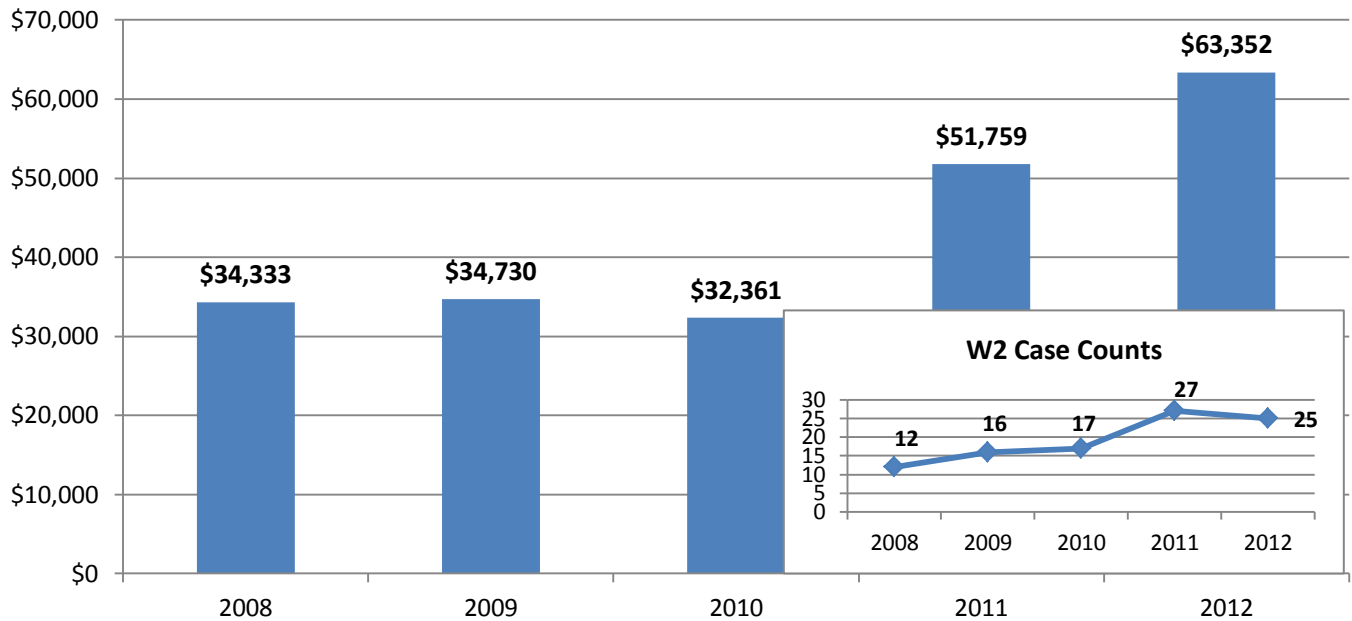
Total FoodShare Benefits Issued



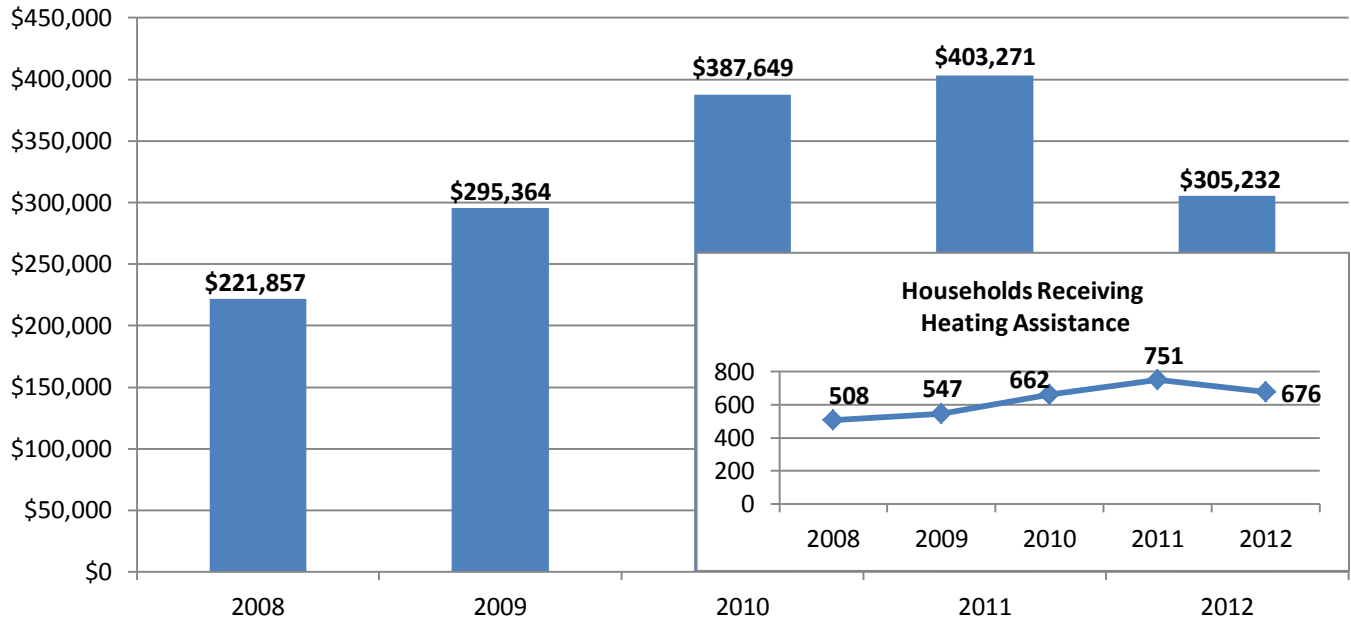
Interim Assistance - Total Basic Grants including Medical Costs



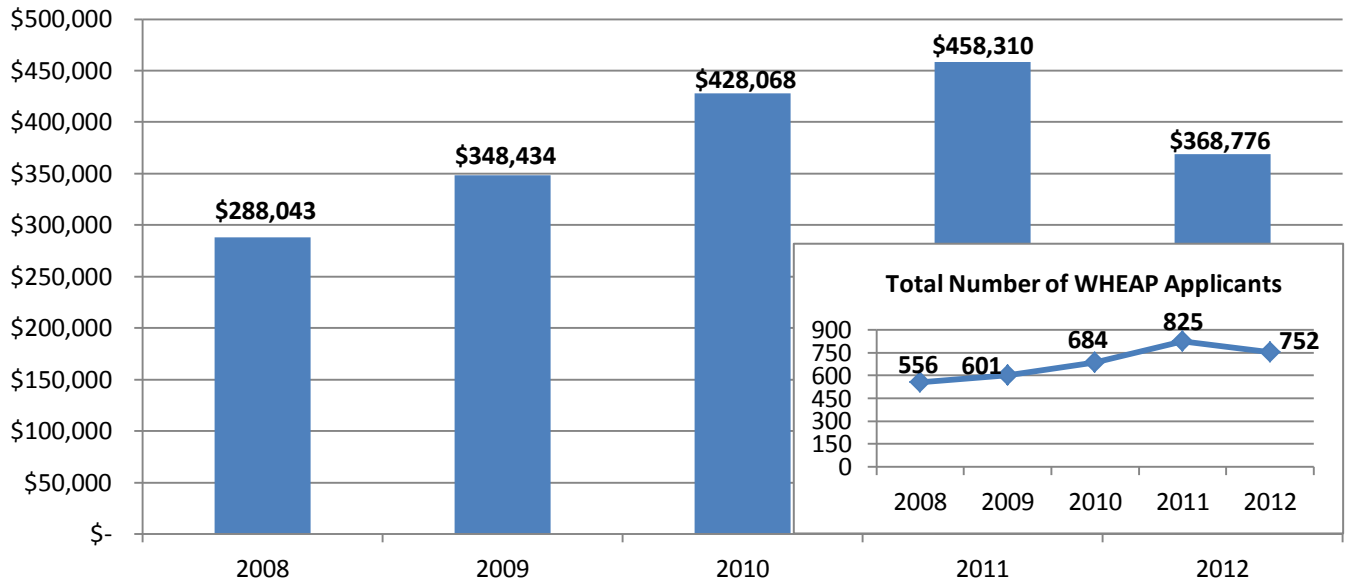
W2 Benefits and Supportive Service Payments



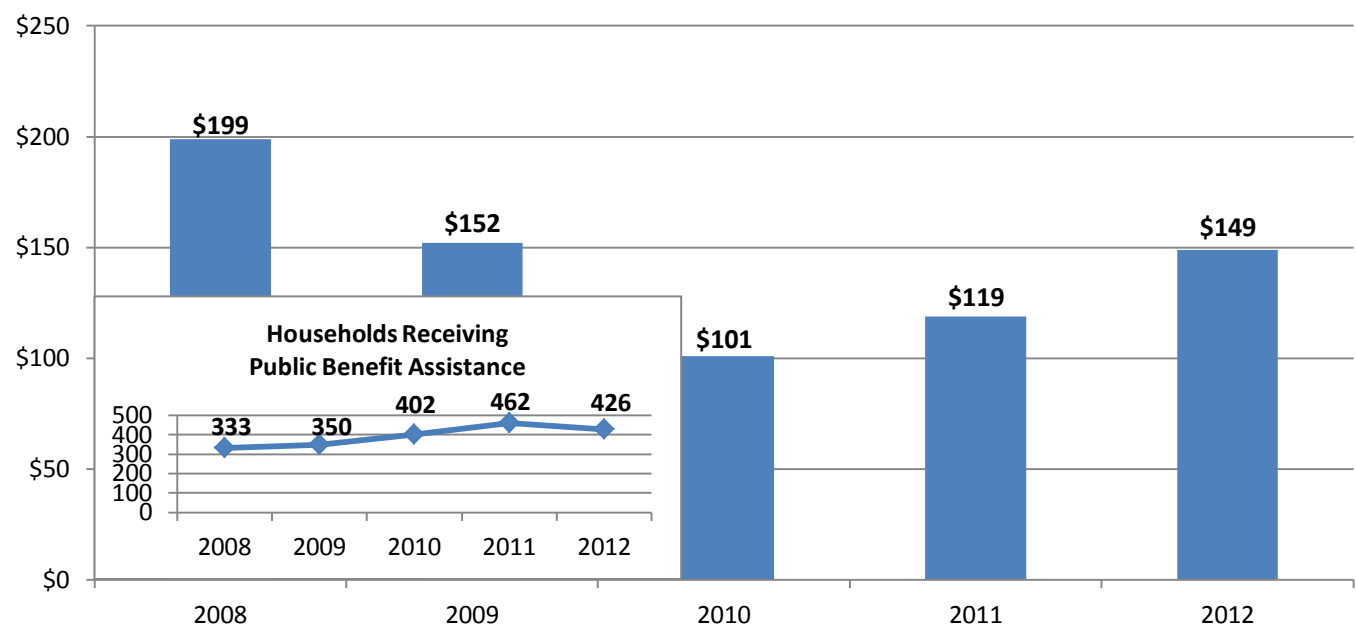
WHEAP Heating Assistance Paid



Total WHEAP Benefits Paid (Heating and Public Electric Benefits)



Annual Average Public Benefits Paid



FAMILY SERVICES SECTION

Bayfield County Family Services Section has seven social workers with a variety of experience and education. Two social workers oversee case management of the Mental Health (MH) and Alcohol and Other Drug Abuse (AODA) cases, including the emergency detention (ED) process. There are three social workers who have special training for Child Protective Services in investigations and on-going case management. There are two social workers who provide Juvenile Justice intake and on-going case management. Each worker also has a program in which they over-see the funding and follow statutory requirements and attend trainings and meetings to assure we remain in compliance of the laws.

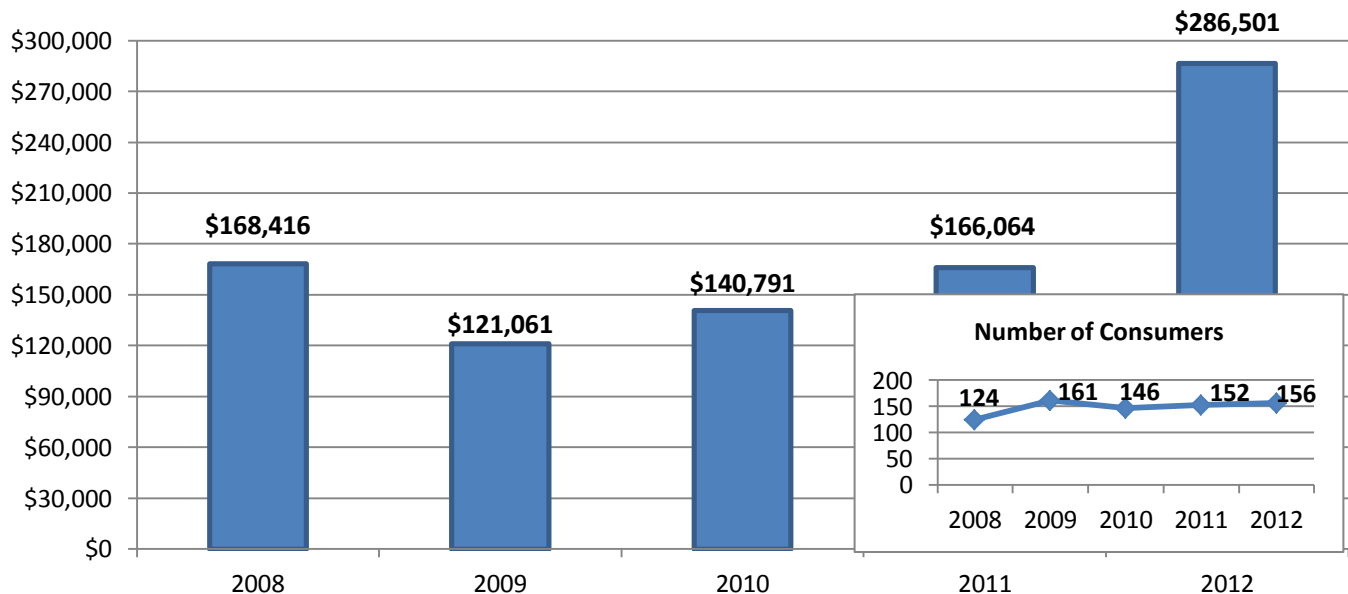
In 2012, mental health costs increased due to the number of individuals in need of emergency detention who did not have insurance. Bayfield County had several meetings with the local hospital to discuss concerns regarding the daily rate, the number of days of service, and potential ways to reduce the cost of care. Bayfield County has begun telephoning the Behavioral Health Unit daily to participate in staffing cases with hospital personnel to get daily client updates as well as to assist in identifying other resources or potential alternatives for clients. The Department continues to utilize the Northland Counseling Services crisis bed for clients who do not require hospitalization and are appropriate for a less restrictive placement. In 2012, \$80,815.64 was recovered in Medical Assistance reimbursement billing for crisis bed services.

Bayfield County received a total of 101 Juvenile Court Intake referrals from law enforcement in 2012, compared to 113 for 2011. One juvenile was placed at a Juvenile Corrections facility. There has not been a placement in that facility for several years. There were several other youth who received 30 day inpatient assessments for their behaviors and delinquent acts. Several of these youth were placed out of home to assist the youth and families with therapy, counseling for criminal thinking and learning the skills to cope when they are returned back to the community. Bayfield County spent \$443,018 for out of home care in 2012, compared to \$ 328,976 the previous year. Several of the out of home placements were due to the youth's severe mental illness and/or substance abuse or criminal behaviors, which would have put others at risk had they not been placed.

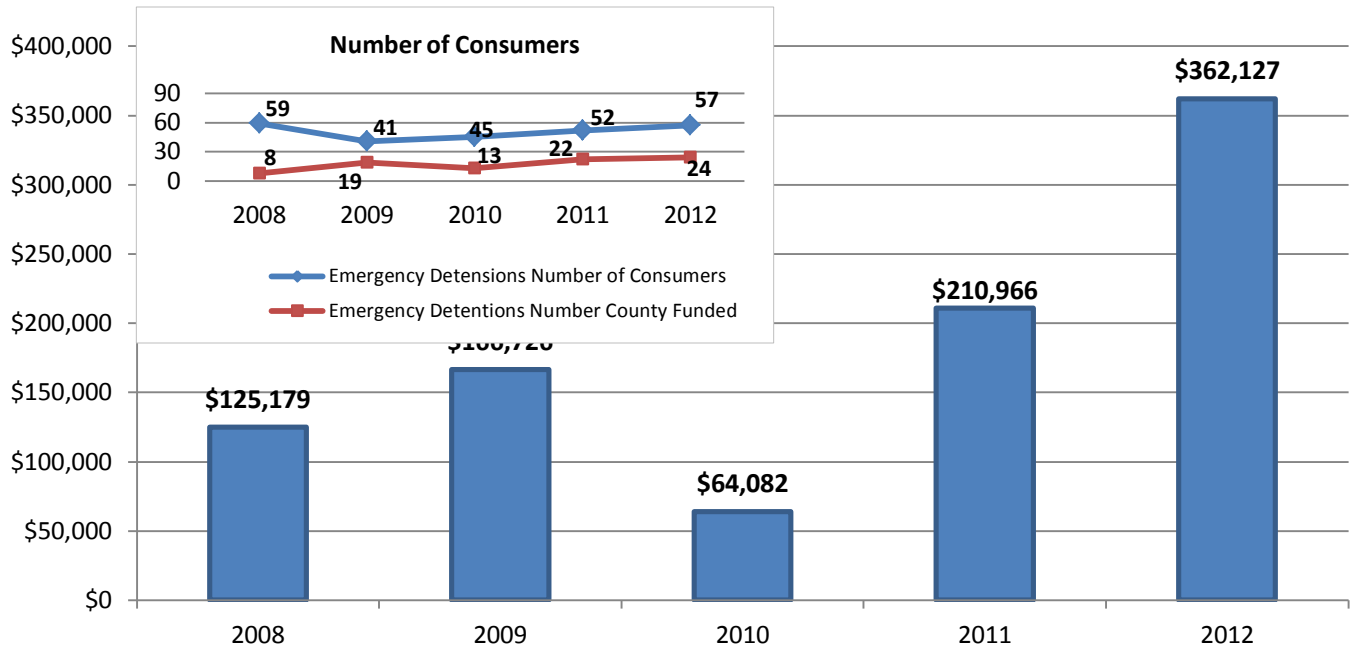
Bayfield County Department of Human Service Mental Health Coordinator and Family Services Manager had several conversations with the Community Service Program contractor and other providers seeking intensive in-home services for several youth with severe mental illnesses. Providers are willing to discuss the potential for increasing their capacity in this area. However due to the limited number of children who need this service, no one has yet committed to providing the service. A number of youth were assessed locally and the recommendation was to have a more thorough assessment provided by Residential Care Center while the child was placed there. These centers provide a variety of services that strengthen the skills of youth and their families so the child can return to their communities. Thirty days in these facilities often cost over \$9,000. Intensive in-home therapy would be less costly, the child would not have the disruption of leaving the home, and a provider could help the family build or strengthen community supports. Family Services staff continues to refer children to the Children's Long Terms Services waivers when appropriate. Unfortunately, there are waiting lists for these programs.

In 2012 Family Services continued to focus on the health and safety of Bayfield County residents and worked hard to find appropriate services for individuals and families within our community. Bayfield County social workers and the Family Services Manager met with Red Cliff Indian Child Welfare (ICW) Director and case workers as needed to discuss and coordinate services for tribal children and families whose Child Protective Services cases overlapped between the Tribe and the Department. Bayfield County and Indian Child Welfare workers attended Court hearings in each jurisdiction as appropriate or requested. Child Protective Services cases can be very challenging. They are often contentious and workers must learn to identify when the family is being truthful and when the family is trying to manipulate them. It is extremely difficult work and we are lucky to have professional, caring staff who are committed to improving the lives of the clients they work with.

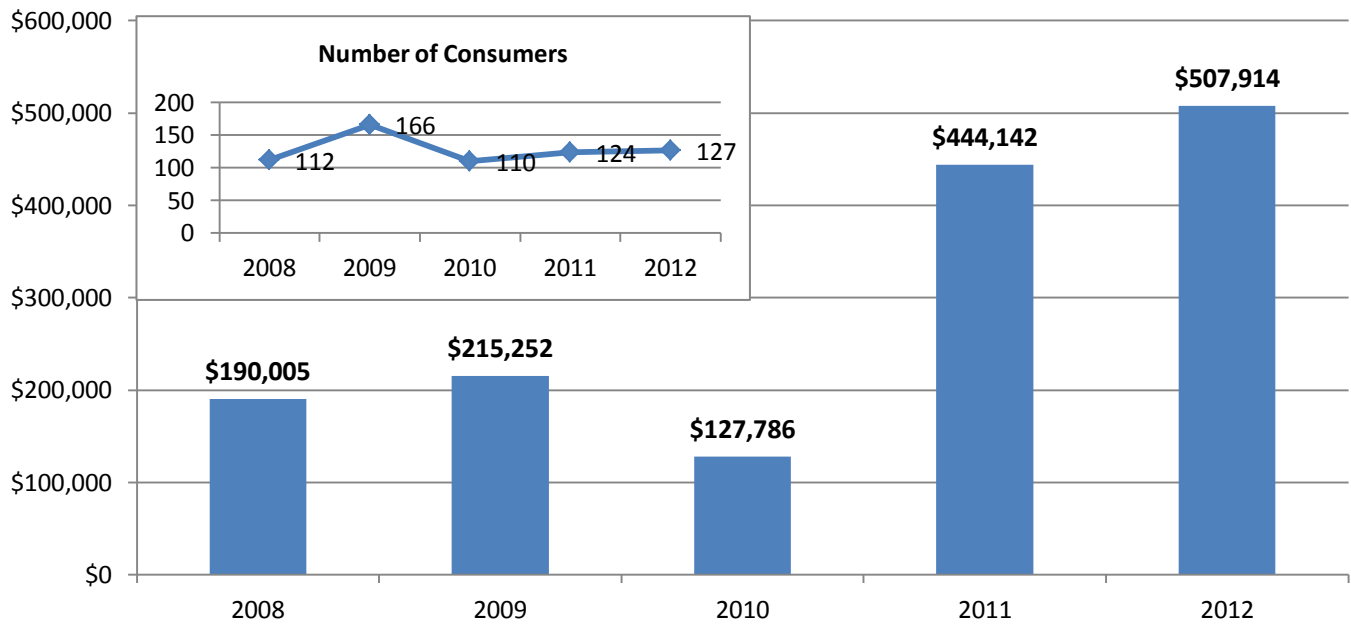
Alcohol and Other Drug Abuse Costs Per Year



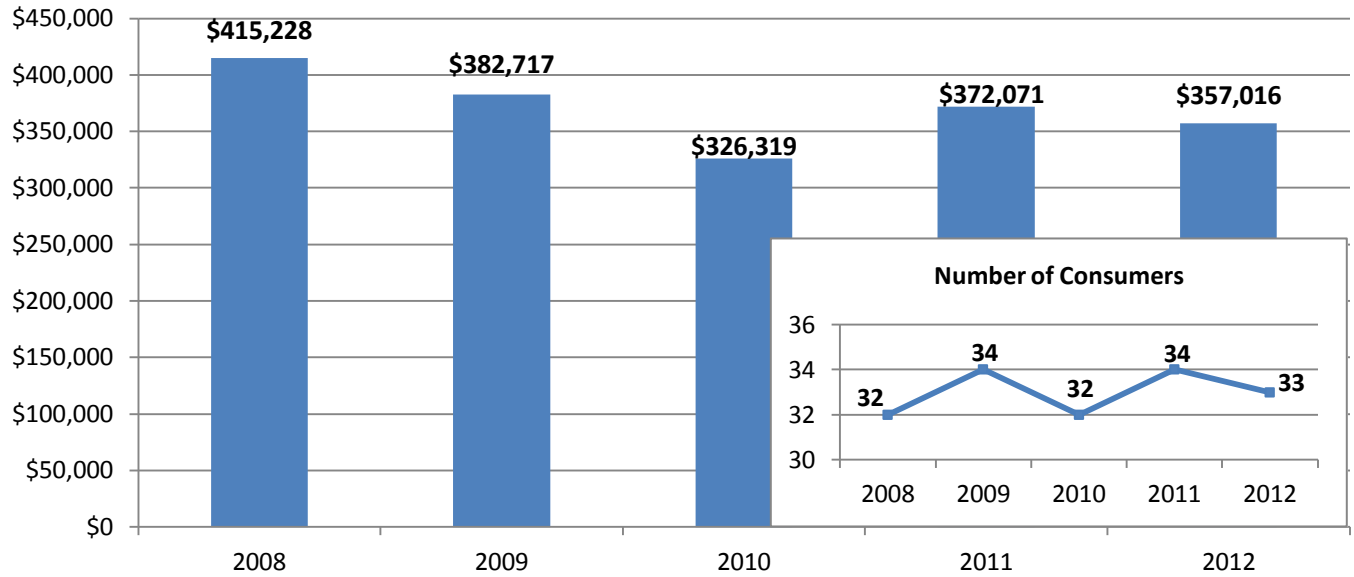
Emergency Detentions



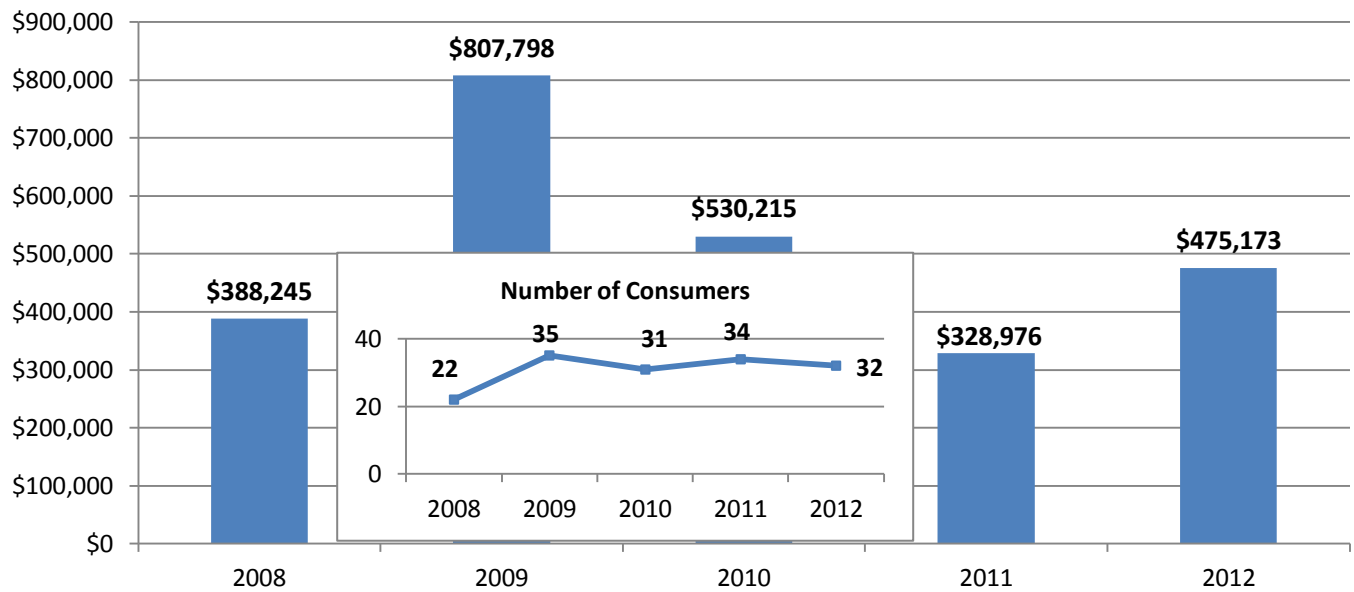
Mental Health Costs Per Year



Community Support Program Costs Per Year

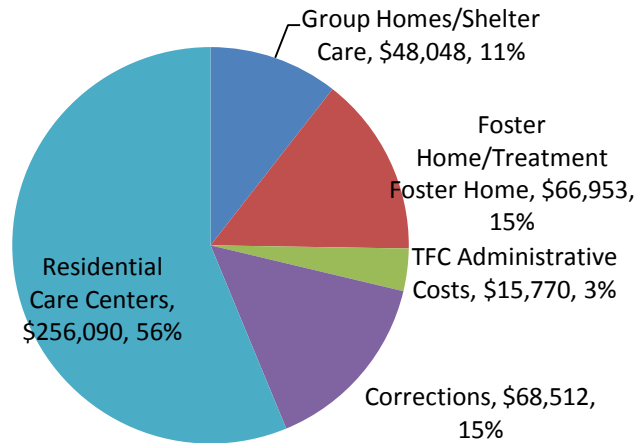


Children in Substitute Care Net Costs Per Year



2012 Substitute Care Placement Costs

Gross Year Total = \$455,373



Service	2009	2010	2011	2012
Corrections	0	0	0	\$68,512
Treatment Foster Home Administrative Costs	\$21,937	\$14,795	\$21,270	\$15,770
Group Homes/Shelter Care	\$139,467	\$132,840	\$14,668	\$48,048
Foster Home/Treatment Foster Home (TFH)	\$87,009	\$113,672	\$77,317	\$66,953
Residential Care Centers	\$600,001	\$289,740	\$198,561	\$256,090
TOTAL	\$848,414	\$553,517	\$311,816	\$455,373
Offsetting Revenues	\$40,616	\$23,302	\$32,318	\$51,526

AGING AND DISABILITY SERVICES SECTION

The mission of the Aging and Disability Services Section is to “Support independent community living by respecting personal choices.”

When reflecting back on 2012, the theme of “riding the wave” came to mind. Aging and Disability Services experienced program policy changes, increased case loads, opportunities for providing and hosting outreach activities and events, and staffing changes. Each is no more important than the other, and each was endured as a part of the daily trials and tribulations encountered while delivering excellent service to county residents.

A significant change to the Preventative Health funding from the Administration on Aging for the Aging Programs was implemented April 1, 2012. This change required funding to be used for evidence-based activities. One staff completed training to become a class leader for Stepping On, which is an evidence-based falls prevention program. To fully implement the Stepping On program, a small grant- Bring Health Aging to Scale- was applied for and awarded. An introductory meeting for the Bring Health Aging to Scale grant took place to generate interest and support. A renewed partnership with the Retired and Senior Volunteer Program (RSVP) flourished in 2012 and the agency partnered with the Department to provide support by taking registrations for classes and making copies for participants.

The “Helen EF case” was decided by the state Court of Appeals in April 2011. It ruled that patients who have a single diagnosis of Alzheimer's disease cannot be involuntarily committed for mental health treatment because Alzheimer's is not a “treatable” illness. The determination prohibits individuals with Alzheimer's from being placed in a mental health facility under Wisconsin State Statutes Chapter 51. In the past, an initial Chapter 51, mental health commitment, could be transitioned to a Wisconsin State Statutes Chapter 55, protective placement or custodial care. Skilled nursing facilities expressed concerns that their residents with dementia needed admittance to the Memorial Medical Center's Behavioral Health Unit for their behaviors, but were often times denied due to the new prohibition. The Department collaborated with Amery Regional Medical Center staff to provide training to local providers on how to work with individuals with challenging behaviors. This training was available to skilled nursing facilities, Community Based Residential Facilities (CBRF) and adult day programs in Ashland and Bayfield Counties. The training was held in late October at the Northern Great Lakes Visitors Center and was well received. In order to secure additional resources when working with individuals with dementia, a proposal to join the Woodland Enhanced Health Services Commission was presented to the Department's board and the County Board. Both boards approved the proposal, which allows Bayfield County preferential ability to place residents in the facility at a reduced rate.

The Adult Protective Services case load has steadily increased over the last five years. Because of this, a new chart has been added to track the changes. Adult Protective Services are services provided to individuals who, due to: a serious and persistent mental illness; degenerative brain disorder; developmental disabilities; or other incapacities are determined to be incompetent. Protective services and guardianship for adults are different forms of protection and support for people who are at risk of harm due to impairment in the ability to make or communicate decisions. The term protective placement is one that is made for the primary purpose of providing for the care and custody of an individual who is not competent. A protective placement determines where the person will live, as well as what services he or she will receive. Once an individual is court ordered to receive any type of protective service, he or she is assigned a case worker who provides ongoing support and monitoring to ensure the individual's health and safety in the least restrictive setting. 2012 ended with the highest number of new protective placements (12) and the highest number of ongoing cases (23) to date. It is anticipated that this will be an ongoing trend because Bayfield County has a higher than average older population that will continue to grow exponentially until 2030.

The Birth to Three Program, a mandated service, was slightly over budget in 2012 due to an increase in the number of children being referred and found eligible for services. Changes implemented over the past few years have proven to be effective. However, increase in the number of children served is increasing the cost of the program.

A self-assessment was performed on the Birth to Three Program in May 2012. There were no adverse findings. During the review, three goals were established for the upcoming year:

1. Primary approach to teaming, identifying a primary coach for each child in the IFSP.
2. Formalize the transition process to make it more seamless & timely.
3. Improve communications with Red Cliff ECC to ensure smooth transitions to the school system.

Marketing and outreach are core activities of the Aging and Disability Resource Center. This includes helping residents understand available options and who they need to contact with questions related to aging or disability. In May 2012, Aging and Disability Services staff worked with members of the Caregiver Support Network to plan a day-long workshop entitled "Final Affairs" at the Northern Great Lakes Visitors Center. Final Affairs addresses sensitive topics such as funeral planning, hospice and palliative care, legal matters, financial issues, and other factors to consider in advance care planning. The training was attended by 40 individuals. Final Affairs may become an annual event

and may be presented in other locations throughout Bayfield and Ashland Counties in the future.

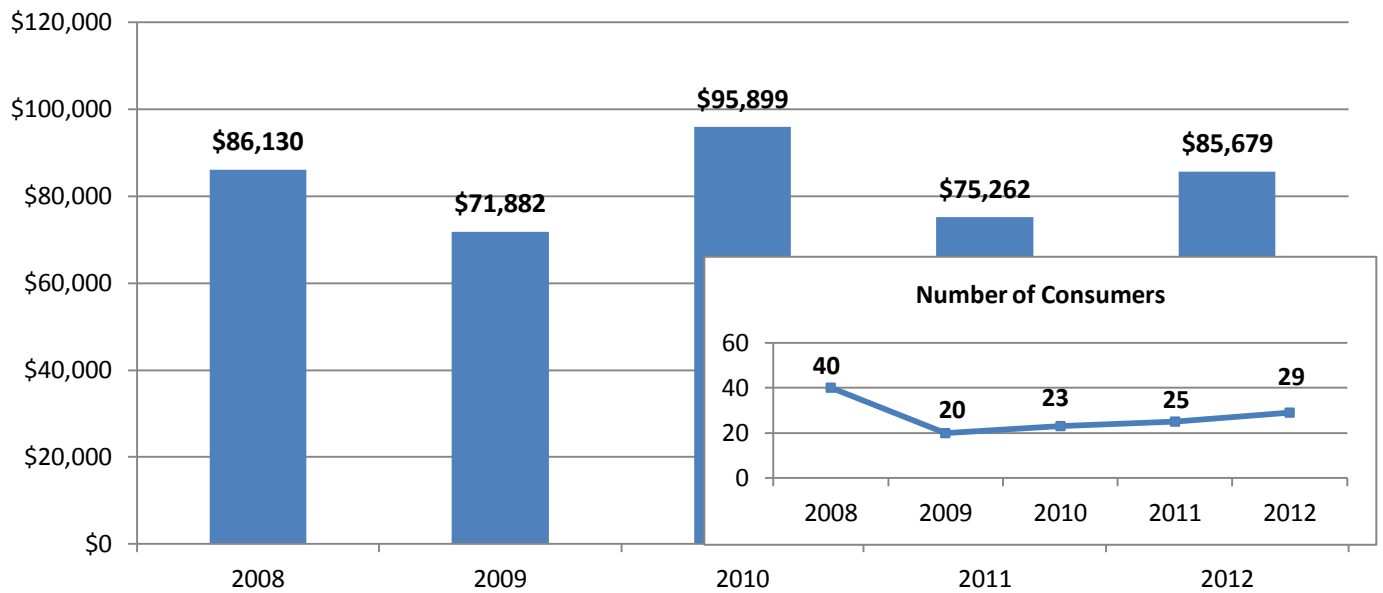
There were several staff changes in 2012. In March, an Adult Protective Services Social Worker who worked for the department for approximately seven months left to move back to southern Wisconsin to be closer to family. Interviews were held in April and Social Worker JoAnn Paraventi accepted an employment offer. JoAnn has done a remarkable job. We were fortunate to have had the opportunity to bring former social worker Karen Guski back for one week for training purposes since the State does not provide new worker training in Adult Protective Services. While being short staffed, Social Worker Patti Carlson focused primarily on Adult Protective Services work and Aging Assistance Specialist Emily Bainbridge accepted most of the ADRC referrals. With the change of staff, caseloads were restructured and Elderly Benefit Specialist Sheila Mack took over as case manager for the Community Options Program, which includes ongoing supports for individuals with mental illness.

IN 2012, the ADRC of the North determined that a second Disability Benefit Specialist (DBS) would be hired. The New DBS would assist the caseload that had grown to exceed DBS Jamie Makin's capacity. The Sawyer County ADRC branch office agreed to hire and supervise the second DBS. A new DBS was hired in the first quarter of the year. A workgroup was convened and determined that Jamie would provide service to Ashland, northern Bayfield and Iron Counties and the second DBS would provide service to Sawyer and Price and southern Bayfield Counties. Unfortunately, the second DBS tendered her resignation later in the year and the hiring process was repeated. Adding a second DBS has been successful and both Disability Benefit Specialists are currently working well together.

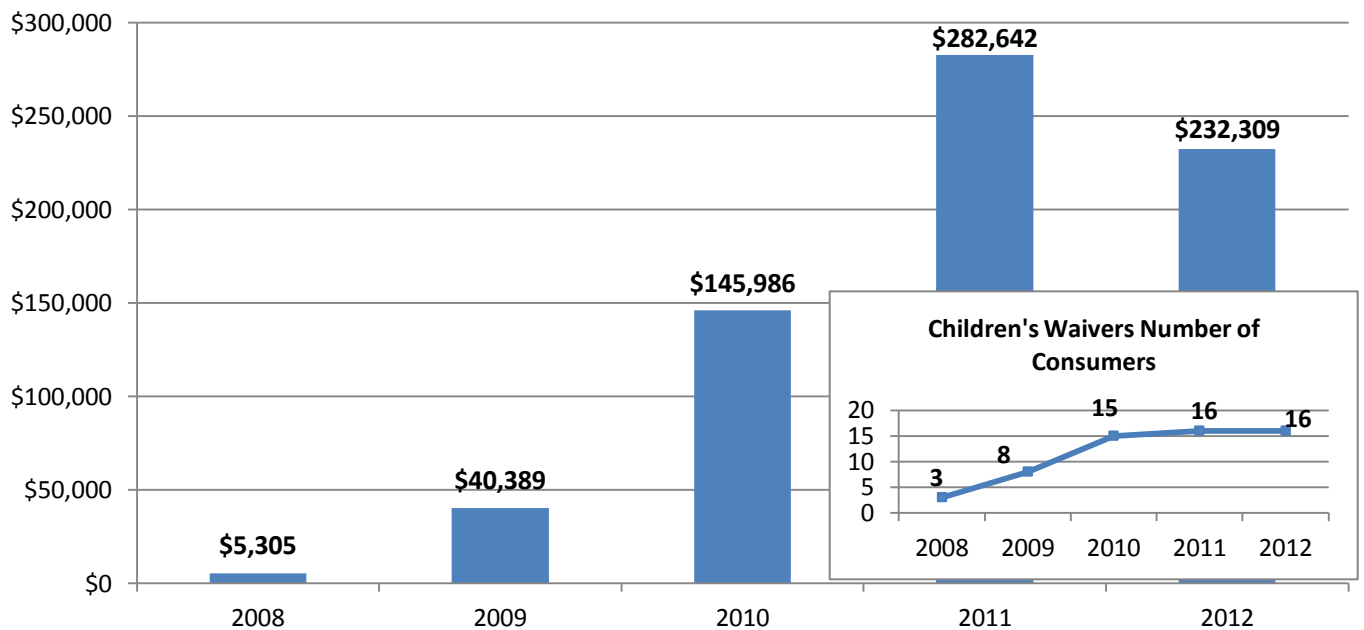
Long term staff member, Social Worker Michele Ochsner submitted her retirement notice in November. Michele was employed by Bayfield County for over 25 years and was a wealth of historical and institutional knowledge. We reviewed applications for an ADRC Youth Transitions Social Worker and interviews were held in early December. A Social Worker was hired and started cross training with Michele before the end of the year.

Overall, Aging and Disability Services managed to "ride the wave". Staff is incredibly resilient and keeps up with the ever-changing needs of those we serve.

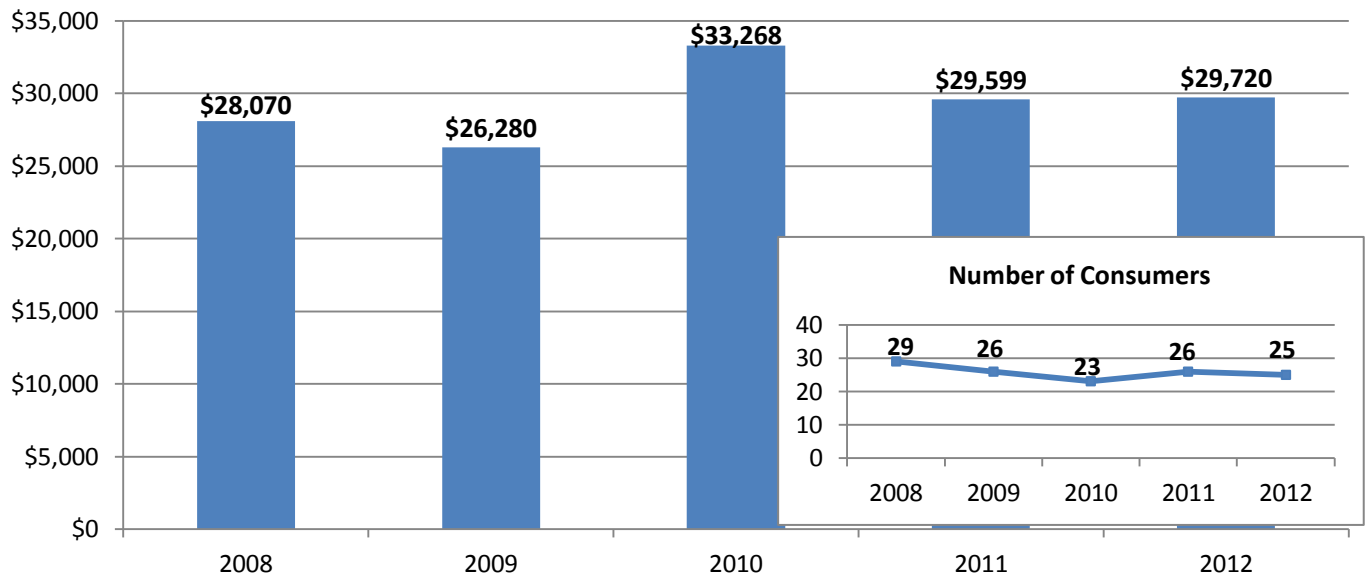
Birth to Three Program Costs Per Year



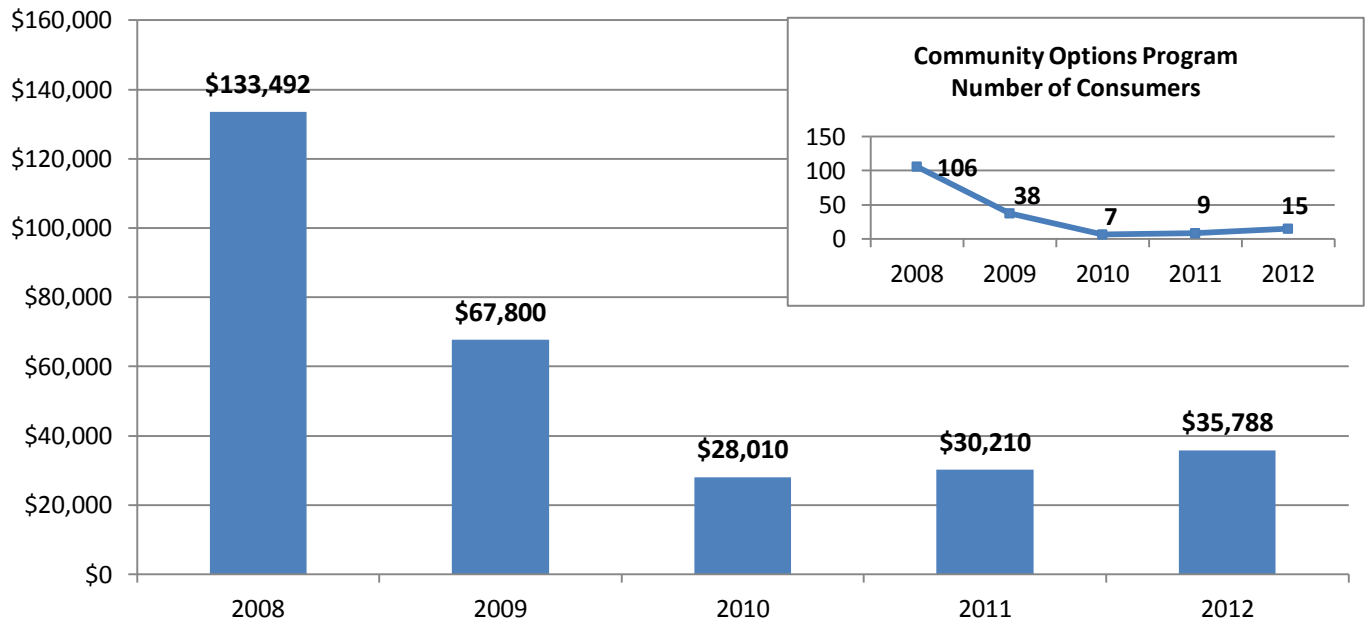
Children's Waivers Costs Per Year



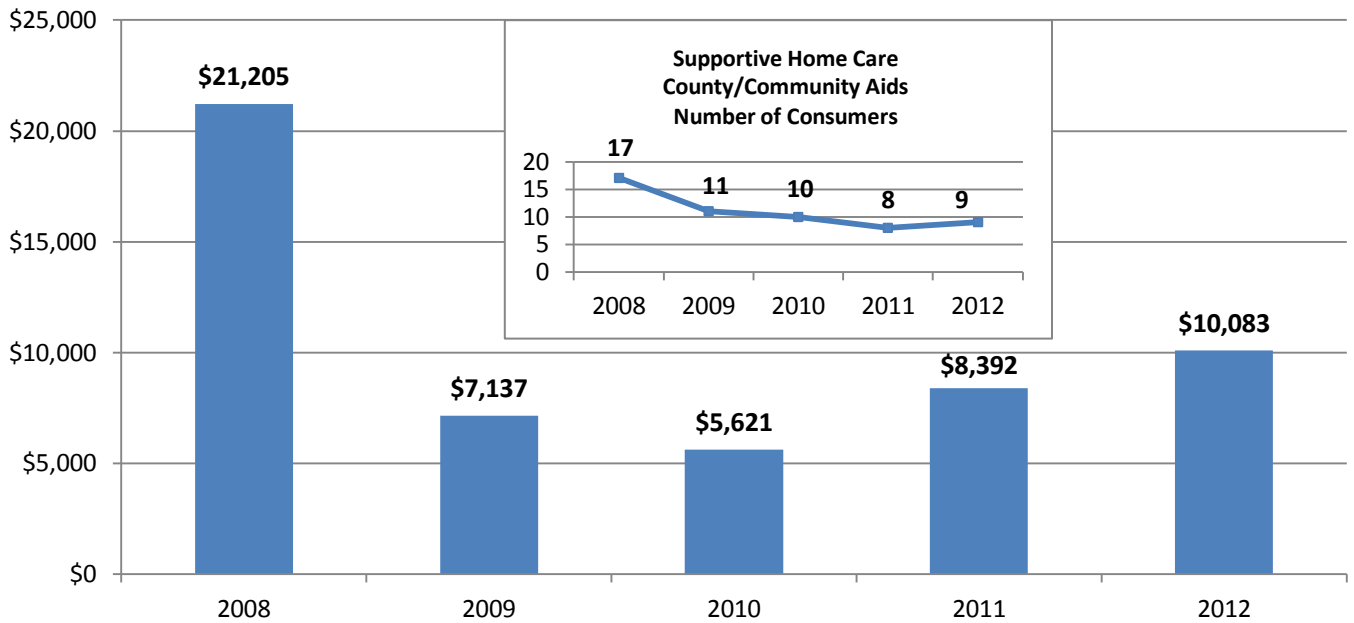
Family Support Program Costs Per Year



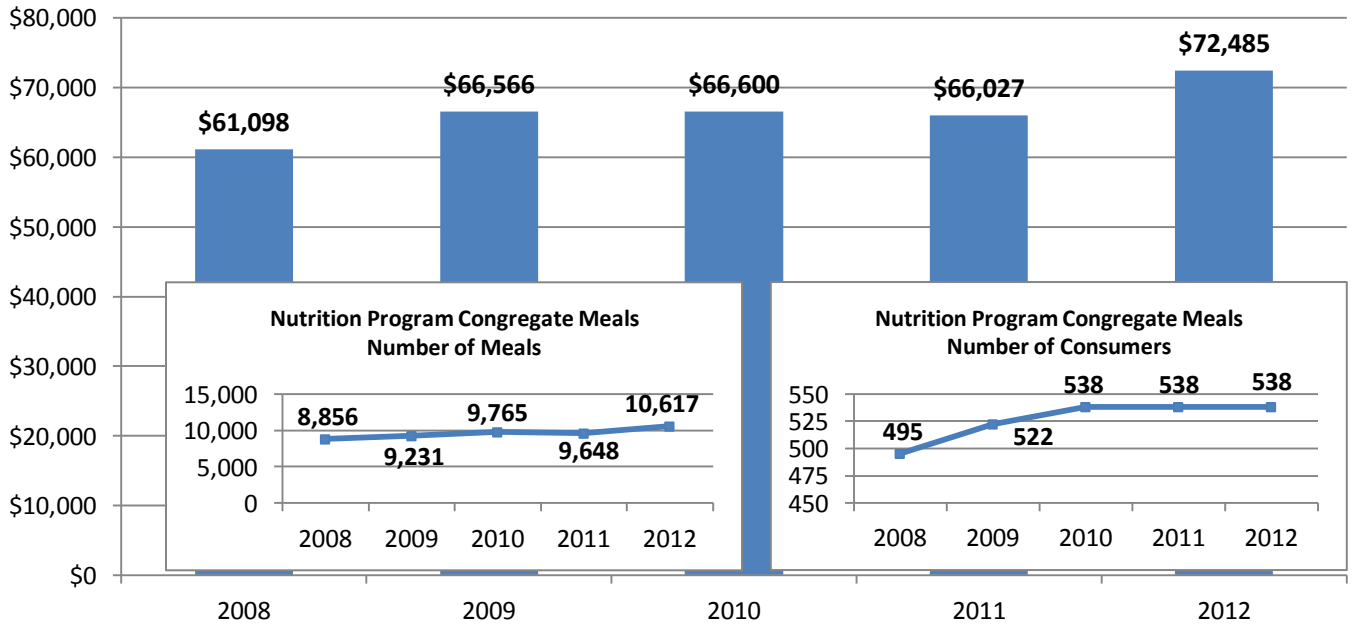
Community Options Program Costs Per Year



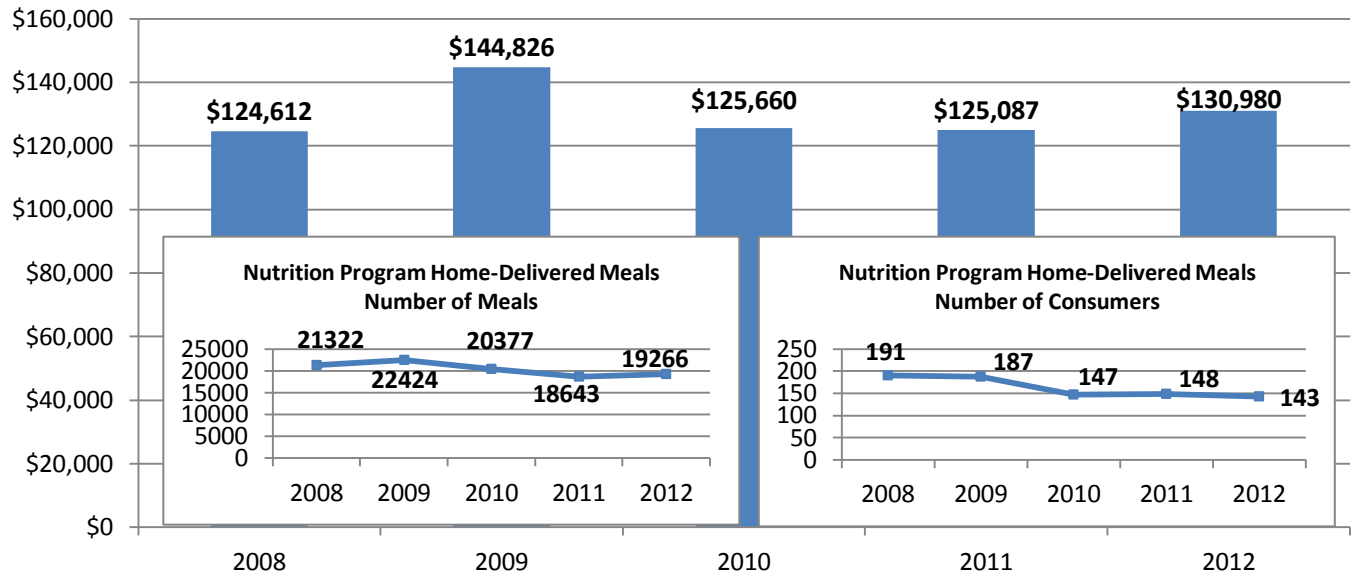
Supportive Home Care County/Community Aids Costs Per Year



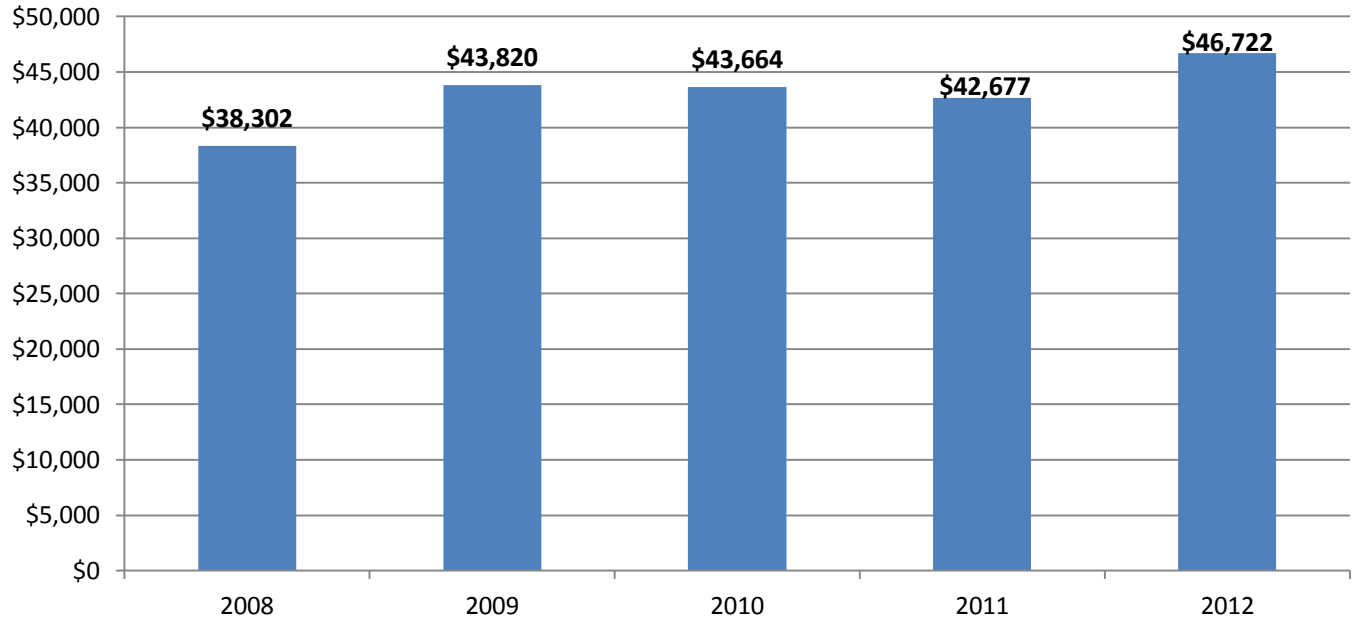
Nutrition Program Congregate Meals Purchased Costs Per Year



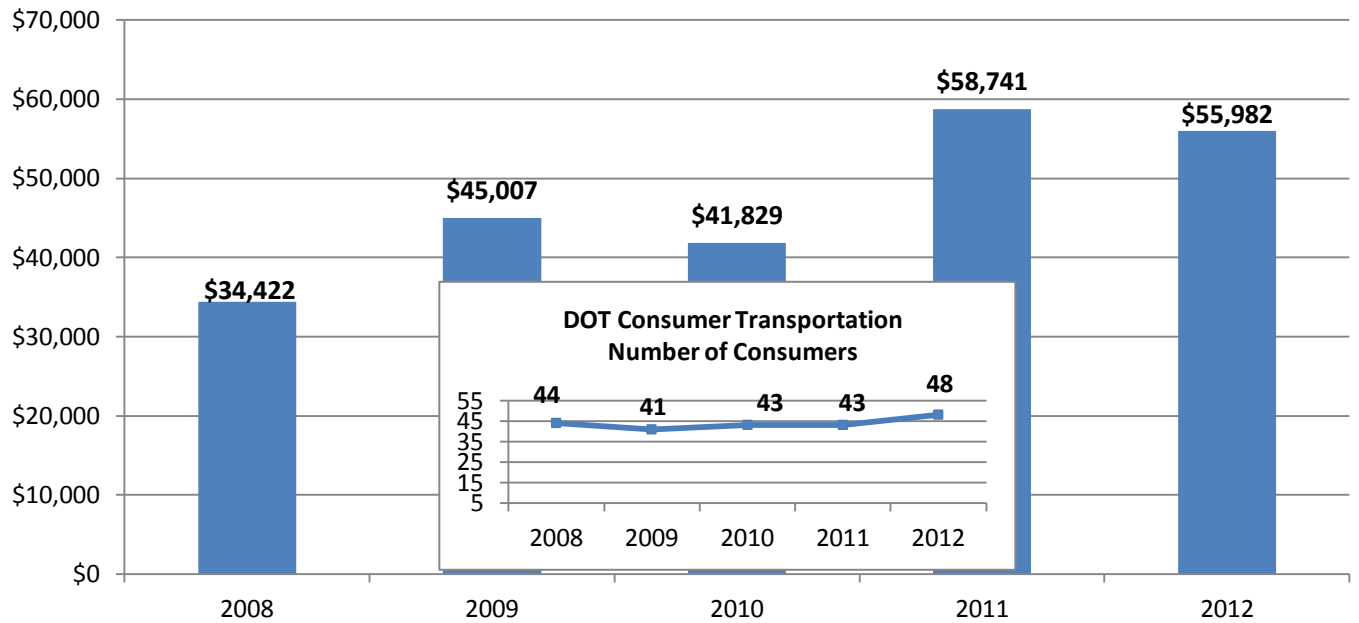
Nutrition Program Home-Delivered Meals Purchased Costs Per Year



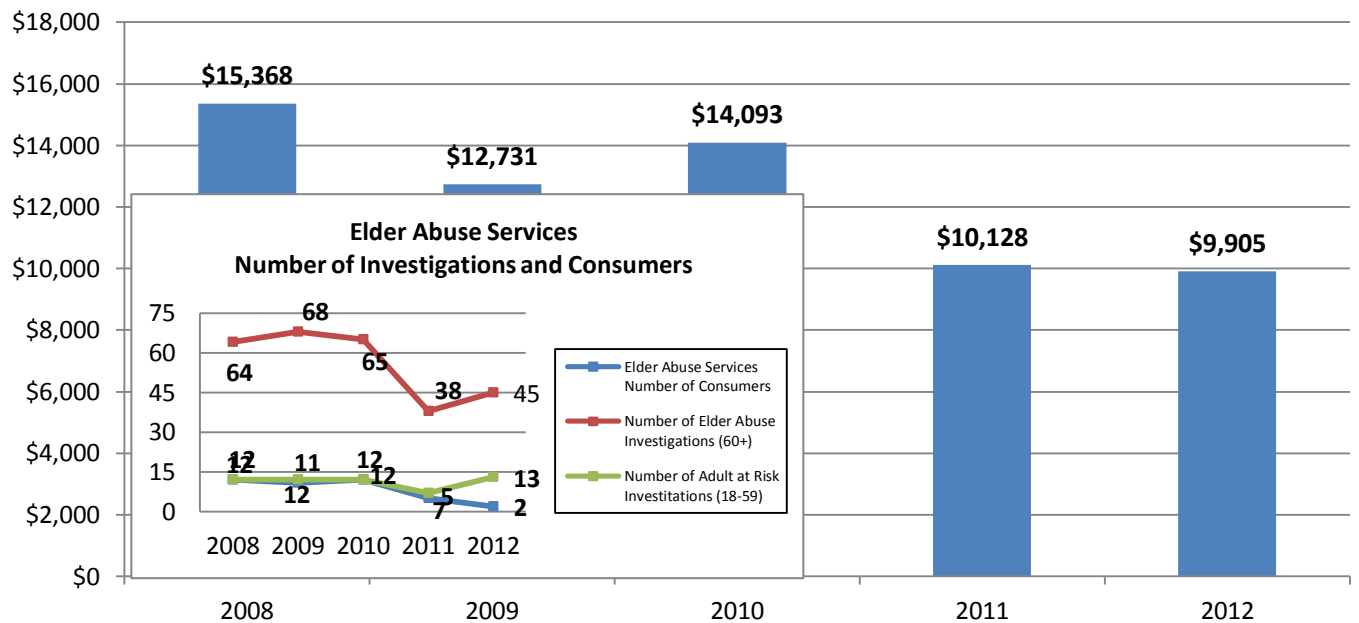
Nutrition Program Contributions



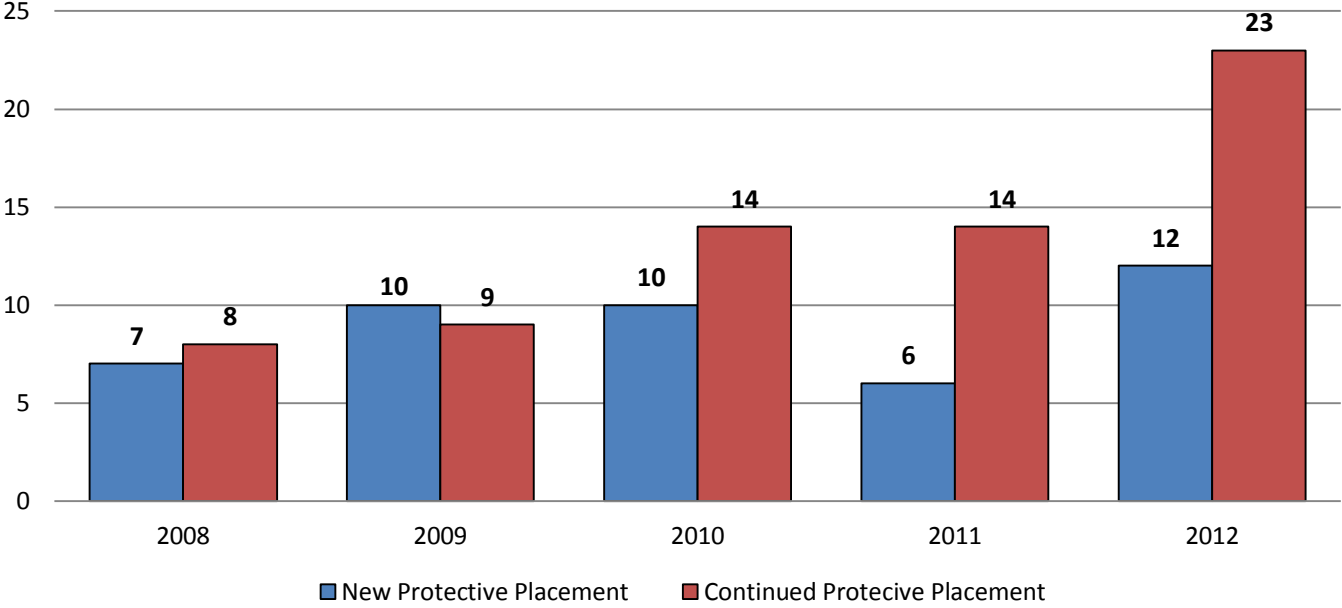
DOT Consumer Transportation Costs Per Year



Elder Abuse Services Costs Per Year



Bayfield County Protective Placements



DEPARTMENT OF HUMAN SERVICES CALENDAR 2012 ACCOMPLISHMENTS

- √ *Developed and implemented a cognitive screening program for interested adults. Referred individuals to the Dementia Diagnostic Clinic in Ashland when further testing was warranted.*
- √ *Improved services to the elderly and their families by providing assistance and fact sheets on guardianships, protective placements, and advance directives.*
- √ *Improved services to youth with disabilities and their families by partnering with schools and providing outreach and information to families of youth transitioning from school-based special education programs to adult independent living.*
- √ *Developed a plan to provide a smooth and seamless transition for Wisconsin Works clients to Workforce Resources Inc., the new provider as of January 1, 2013.*
- √ *Successfully transitioned Red Cliff Lake Superior Band of Chippewa tribal members who do not live on the reservation, from the federal Temporary Assistance for Needy Families (TANF) Program to the Wisconsin Works (W-2) Program.*
- √ *Successfully negotiated a contract with the National Council on Crime and Delinquency to purchase the Juvenile Assessment and Intervention System (JAIS), an evidence based tool used to assess youth who are referred to the Juvenile Justice system by law enforcement.*
- √ *Developed a training plan for Family Services staff for the JAIS. Training on the tool to begin in January 2013.*
- √ *Enhanced services to participants in the Birth to Three and the Children's Long-term Support Waiver Programs by developing and implementing third party billing procedures.*
- √ *Improved services provided to the customers of the Northern Income Maintenance Consortium (NIMC) by securing trained support staff who obtain telephonic signatures on the Call Center.*

DEPARTMENT OF HUMAN SERVICES CALENDAR YEAR 2013 GOALS

- √ *Work with local providers to determine if there is a potential to develop additional local resources for community-based services or institutional services for individuals diagnosed with Alzheimer's disease or similar dementia with significant behavioral issues or aggression toward others.*
- √ *Develop a plan and prepare to implement the federal Patient Protection and Affordability Care Act. Hire and train regional limited-term Income Maintenance employees to address the projected increase in volume beginning October 1, 2013. Hire and train an additional limited term .5 clerical staff person to accept telephonic signatures on the regional Call Center.*
- √ *Reduce reentry of high risk youth into the Juvenile Justice Programs through improved services to youth and their families by correctly identifying their needs by using the Juvenile Assessment and Intervention System (JAIS), an evidence based tool.*
- √ *Develop a plan, in coordination with the Criminal Justice Council, to improve services to families and youth with substance abuse issues by implementing a Family Drug Court in 2014.*
- √ *Improve staffing patterns and address work load issues by contracting with Northern Lights Services (NLS) Registered Nursing staff to become certified Children's and Adults' functional screen assessors.*
- √ *Improve emergency preparedness by establishing response protocol for staff. Develop a disaster kit for the department and meet with Emergency Management and Public Health to review current practices outlined in Annex F.*
- √ *Establish a clear identity for the Aging and Disability Services Section. Convene a workgroup to explore and identify one brand to be displayed on all outreach and marketing materials. This brand will be recognized as the entity offering information, assistance and services to older adults, people with disabilities, their families, community members and professionals.*
- √ *Recruit and hire a clerical staff person with an education in accounting to provide better back up to the Department bookkeeper.*

DEPARTMENT OF HUMAN SERVICES CALENDAR YEAR 2012 PERFORMANCE INDICATOR(S) / SUMMARY

AGING AND DISABILITY SERVICES

A Disability Benefit Specialist (DBS) provides free confidential services to individuals, ages 18 – 59 with a physical or developmental disability, mental illness, or substance abuse disorder. The DBS answers questions related to Social Security, Medicare, health insurance and/or other public and private benefits. They also provide assistance to those who have barriers to access benefits that they are eligible for.

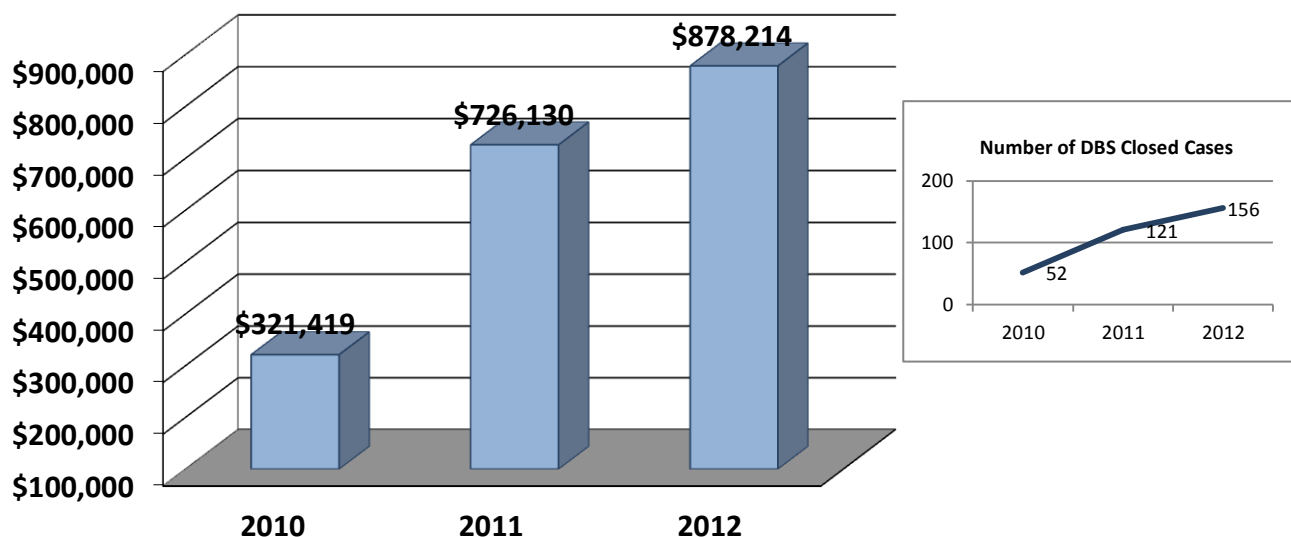
2012 marked the third full year of service for the Aging and Disability Resource Center of the North (ADRC – N) and a year in which a second DBS was hired. We believe that tracking the activities of the DBS Program will allow a measurement that will gauge the efforts, activities, and success of the DBS. It should also provide information that will help determine the customers' satisfaction of services.

The 2012 data comes from the internet-based DBS Secure Website. This data base is used exclusively by Disability Benefit Specialists throughout the state and includes data pertinent to individual caseloads.

Per the Summary Report, the DBS of the ADRC - N closed 156 cases with a total positive monetary impact of \$878,214 in 2012. This means that a majority of cases experienced a favorable result, typically a positive eligibility determination and successful enrollment into a public program or benefit the individual was entitled to receive, prior to being closed.

There is a significant increase in the numbers of cases closed and monetary impact from 2011 through 2012. Even though a second DBS was hired in early 2012, that individual resigned to take another position. The position was filled again later in the year, but it left one DBS for the majority of 2012.

Monetary Impact of Disability Benefit Specialist Cases Closed



Aging and Disability Resource Centers (ADRCs) provide accurate, unbiased information and assistance to access community resources for older people and people with disabilities. Personalized assistance is provided at the ADRC, over the telephone, on the website, or at an individual's home. Information on a broad range of programs and services is available to any elderly or disabled individual, their friends and family members, professionals, and the general public. ADRC staff provides options counseling and assist people apply for programs or benefits. The ADRC also serves as the access point to publicly-funded long term care.

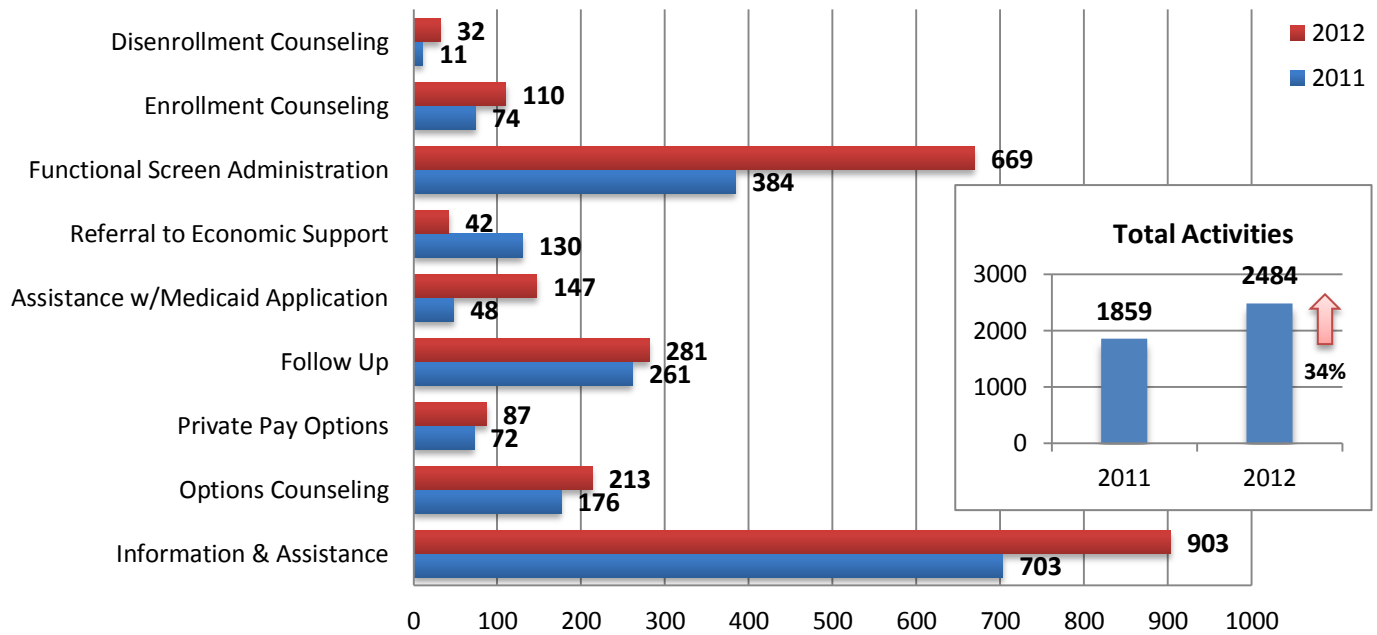
Data collection for ADRC activities includes the age of the contact; a disability type; the caller type; and at least one ADRC activity. ADRC activities are: general information and assistance; options counseling; private pay options; assistance with Medicaid applications; referrals to Economic Support; enrollment counseling; long-term care functional screening; follow up; and disenrollment counseling.

Statewide data indicates that the most frequently selected ADRC activity is information and assistance. Aside from activities related to determining functional eligibility, information and assistance is also the most frequently selected ADRC activity for Bayfield County. Overall, the number of individual activities documented from 2011 to 2012 increased 34% from 1,859 in 2011 to 2,484 in 2013.

The definition of each ADRC activity is listed below:

- Information and Assistance (I&A): Listens to customer inquiry, assesses customer needs, connects customer to service providers, or gains information to meet customer's needs
- Options Counseling: Helps customer evaluate and analyze long-term care service options
- Private Pay Options: Helps customer identify accessible service options for which they will pay
- Follow Up: Contacts customer to determine if their needs were met
- Assistance with Medicaid Application: Helps customer apply for Medicaid
- Referral to Economic Support: Refers customer to Economic Support
- Long Term Care Functional Screen: Conducts screen
- Enrollment Counseling: Helps eligible customer complete application and enrollment process for Family Care or IRIS
- Disenrollment Counseling: Provides information regarding consequences to disenrollment and alternative choices to customers who choose voluntarily disenrollment from Family Care or IRIS; provides counseling to customers subject to involuntary disenrollment

Aging and Disability Resource Center (ADRC) Activities

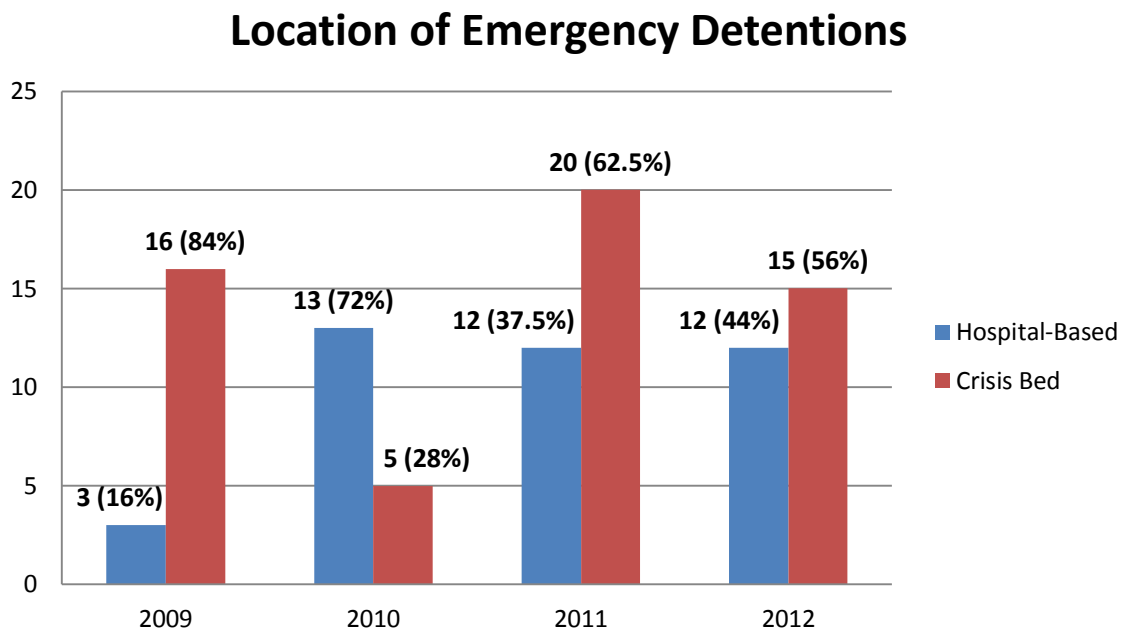


FAMILY SERVICES

In 2012, Bayfield County funded twenty-seven individuals who were placed in emergency detention for a total of 291 days. Fifteen individuals were placed at Northland Counseling Services in a crisis bed for a total of 153 days and twelve individuals were placed at Memorial Medical Center, for a total of 138 days. This maintains a positive trend for this performance indicator for a second year.

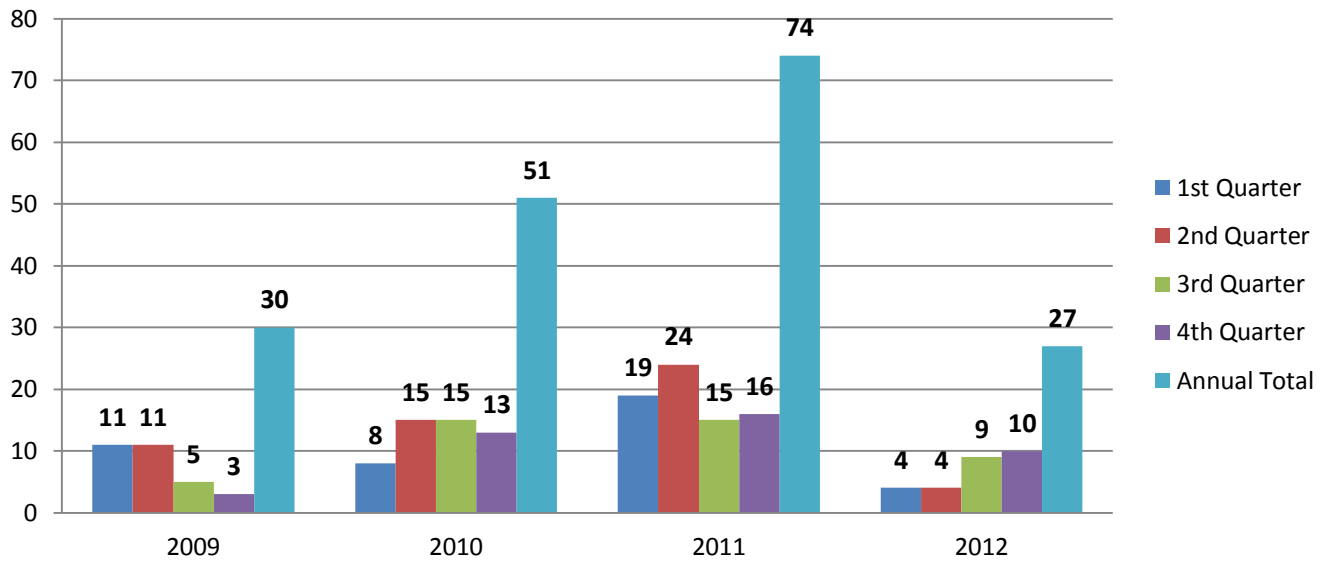
In 2012, Bayfield County paid \$91,035 to Northland Counseling Services for emergency detentions and \$271,092 to Memorial Medical Center. The total cost for the year for emergency detentions was \$362,127.

Bayfield County received reimbursement from Medical Assistance in 2012 for mental health crisis services in the amount of \$80,816.



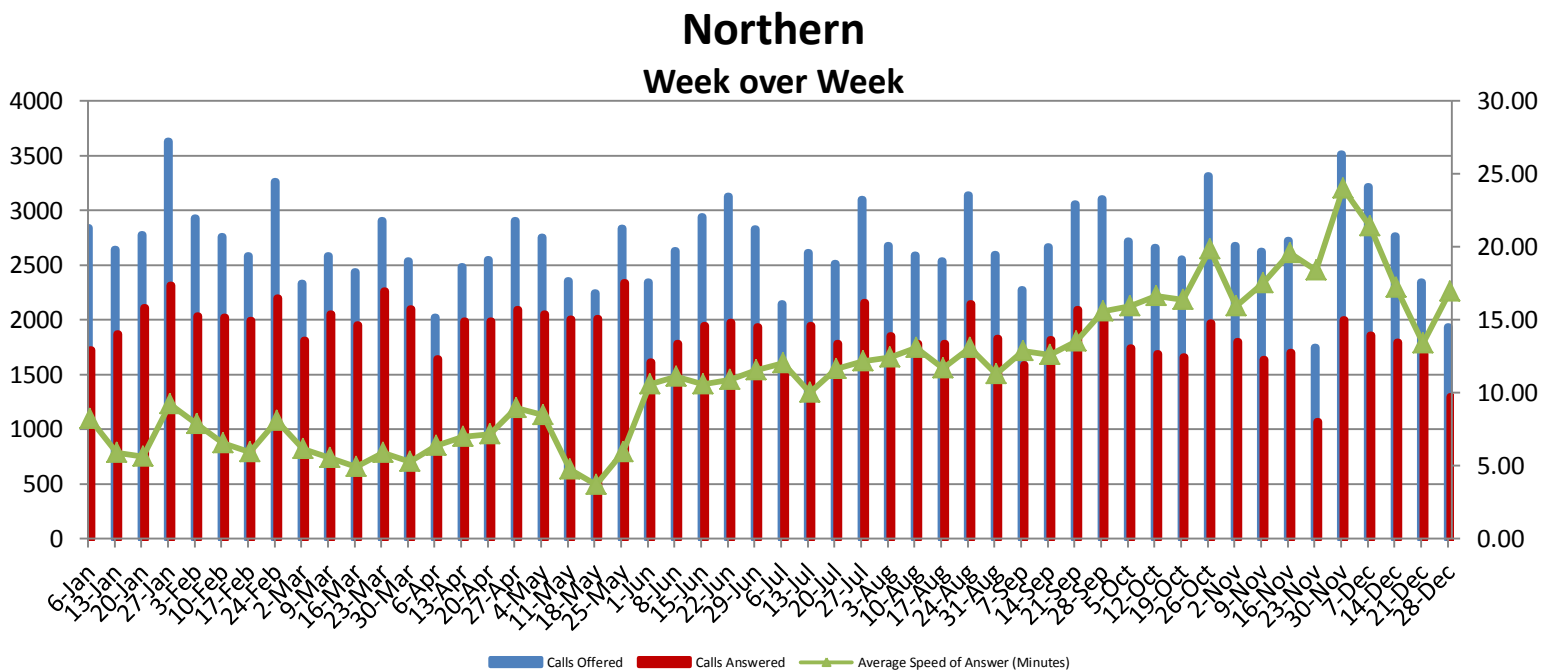
Bayfield County participates in a 15 county Northern Region Multi-County Crisis Initiative Grant. One of the projects administered by the consortia is a mental health crisis line. The consortia contracts with Family Services of the Northeastern Wisconsin to provide this service, which is DHS 34 certified and an integral part of successful diversions. The graph below illustrates the number of calls received from Bayfield County residents from 2008-2012. In 2012, we had 27 individuals who contacted that crisis line that might otherwise have been emergency detained. Detentions were diverted because the callers' immediate needs could be met by the mental health technicians assigned the crisis line. Their assistance included: discussion with the caller; locating appropriate local resources; reviewing and implementing a caller's crisis plan; and accessing inpatient or outpatient services. It is estimated that diversions resulted in a savings of approximately \$161,514 or 81 hospital days in 2012.

Crisis Line Calls

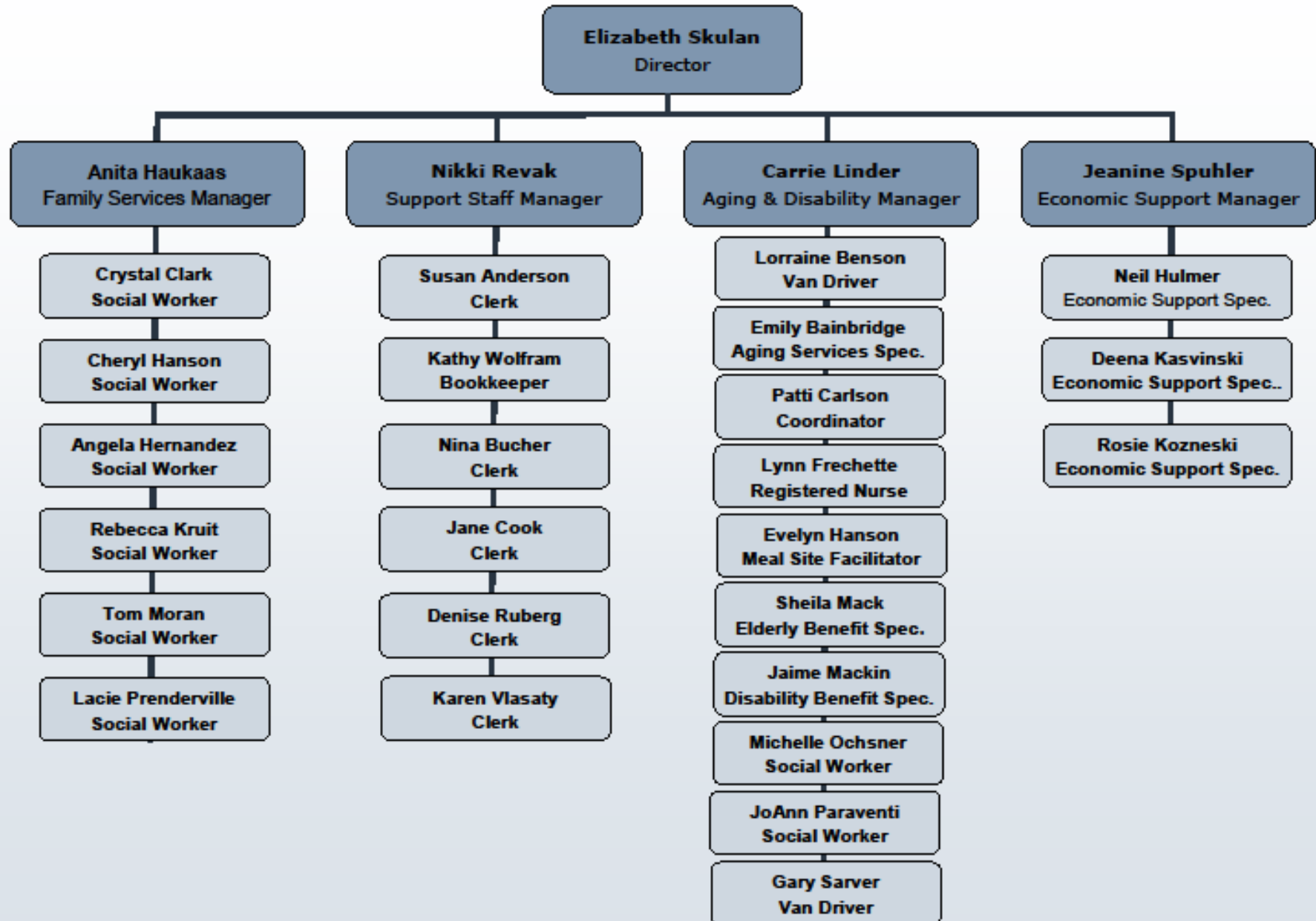


ECONOMIC SUPPORT

Bayfield County Economic Support has always been committed to providing the best possible service to all customers. Since 2000 customer satisfaction surveys were mailed to county recipients in an effort to measure the level of customer service. In 2012, the state required regionalization of Income Maintenance and Bayfield County joined the Northern Income Maintenance Consortium (NIMC) with eleven other counties in the region including Ashland, Florence, Forest, Iron, Lincoln, Price, Rusk, Sawyer, Taylor, Vilas and Wood Counties. As a result, dedicated Economic Support Specialists now assist over 30,000 households from many different counties. The method used to measure success changed. Significant funding cuts resulted in fewer staff, but lead to creative ways to administer public assistance programs while continuing to cultivate a foundation for future quality customer service. The Week Over Week chart below for 2012 shows efforts made to maximize efficiencies in the Northern IM Call Center while changing how business is done. 2012 was a year of challenges and provides baseline data. By comparing 2012 with future years, we expect to see improvements in our overall customer service.



Bayfield County Department of Human Services
as of 12/31/2012



HUMAN SERVICES PROGRAM SECTIONS

AGING/DISABILITY SERVICES	FAMILY SERVICES	ECONOMIC SUPPORT SERVICES
* Adult Family Home Certifications	*Case Management Services for Children and Families (Voluntary and Court Ordered)	*Care Taker Supplement (CTS)
*Advocacy and Outreach		Emergency Assistance
Alzheimer Services	*Child Abuse/Neglect and Child Welfare Assessments	*FoodShare - FS
*Birth-to-Three Program	Child Crisis/Respite Day Care	FoodShare Employment and Training (FSET)
*Children's Long-term Support Waivers	*Child Day Care Provider Certification	*Front-end Verification and Fraud Program
Disability Benefit Specialist	*Child Protective Services- on call 24/7	General Relief/Interim Assistance
*Elder Abuse/Adult Protective Services	*Community Support Program	Information and Referrals
Elderly Benefit Specialist	*Custody and Step-Parent Adoption Studies	Judicare Referrals
Emergency Referrals	*Emergency Detention – AODA and Mental Health	Keep Wisconsin Warm Fund (KWWF)
Family Caregiver Support	*Foster Home Licensing	*Medicaid/BadgerCare Plus
*Family Support Program	*Independent Living	*Wisconsin Home Energy Assistance Program (WHEAP)
Functional Eligibility Determination for Long Term Care	*Information and Referral	*WI Shares (child care subsidy program)
Health Promoting Prevention Activities	*In-Home Family Services	
Home Delivered Meals	Jail Case Management	
*Information and Assistance	*Juvenile Court Intake	
Long-term Care Options and Enrollment Counseling	*Kinship Care Program	
Senior Dining	*Mental Health/AODA Resource Information and Assistance	
Short-Term Case Management	*Mental Health Functional Eligibility	
*Specialized Transportation Services	*Out of home Placements	
*Supportive Home Care and Chore Services	Treatment – AODA and Mental Health	
	*Court Ordered Treatment – AODA & Mental Health	

***Mandated Services**

SUMMARY

From early in the year, it was very apparent that the need for services, particularly mandated services, exceeded available resources. The Department identified a few high needs, high cost clients and an increased number of individuals requiring out of home placements, mental health, and/or substance abuse services. As a result, we began to look for long-term ways to positively affect both the lives of residents and the budget.

In January of 2012, the Department participated in the implementation of a regionalized delivery system of the Income Maintenance Programs. Regionalization was required by Governor Walker who limited counties to developing ten regions within the state. To meet this requirement, Bayfield County partnered with eleven other counties: Ashland, Florence, Forest, Iron, Lincoln, Price, Rusk, Sawyer, Taylor, Vilas and Wood Counties; to create the Northern Income Maintenance Consortium (NIMC). NIMC struggled to create efficiencies that would allow it to meet customer demands. There were severe cuts in funding and the consortium was required to provide services through remote connections and minimize face to face contacts. By the end of 2012, staff were well trained on the system, but funding still did not allow the consortium to be staffed as robustly as it should be.

In July of 2012, the State Department of Workforce Development (DWD) requested bids for proposal for the Wisconsin Works Program, also known as W-2. The bid required regionalization of the program as well as a number of criteria, such as funding via a capitated rate and prohibiting the development of consortia. This made it difficult, if not impossible, for a group of counties to apply. Since Bayfield County had a relatively small program, the Department carefully considered the pros and cons of providing the services regionally. Many of the clients in the defined region were already served by private agencies and there was little interest in partnering with other counties that had maintained the program to administer W-2 to a sixteen county region. As a result, the Department did not submit a bid. Consequently, in the last quarter of 2013, a plan was developed to ensure the smooth transition of clients from Bayfield County to the new provider, Workforce Resources, Inc. as of January 1, 2013.

For some time, the Family Services Section staff has struggled with assessing youth referred to the Juvenile Justice system by law enforcement. In 2012, two social workers took the lead in identifying evidence based tools that might improve the Department's ability to assess youth and reduce the number of youth who re-enter the Juvenile Justice system. Through their research, the Juvenile Assessment and Intervention System (JAIS) was identified and recommended. Although the Department began initial negotiations with the National Council on Crime and Delinquency (NCCD) for the JAIS, the system was much more affordable to purchase if it could be purchased and implemented in coordination with at least one other county. In late fall, Price County agreed to enter into a contract in partnership with Bayfield

County to purchase and implement the JAIS. A contract was signed in November and training and implementation of the tool was scheduled for January 2013.

An additional Disability Benefit Specialist (DBS) was hired regionally for the Aging and Disability Resource Center of the North (ADRC – N). The new position was hired and located in Sawyer County. The DBS located in Bayfield County was tasked with training the new DBS. The new DBS provides services to southern Bayfield, Sawyer and Price County residents, while the DBS position located in Bayfield County provides services to northern Bayfield, Ashland and Iron Counties. The individual hired in early 2012, left the position approximately one month after hire and recruitment to fill the position began again. By the end of the year, the second DBS position was hired. As a result, no waiting list was established for DBS services in 2012.

In December 2012, the Department was notified of a support staff who accepted a promotion to the Bayfield County Treasurer's office as of January 2013. This change allowed one of the Department staff to move into a more prestigious and better compensated county position and it afforded the Department an opportunity to create efficiencies. In January 2013, a request was made and approved to fill the position. The Department will recruit a candidate with strong accounting skills – a need that has been identified. The skills required of support staff have changed over time as Human Services Programs, State data bases, and program rules and requirements have changed.

Although federal and state revenues are allocated to pay for mental health services, substance abuse services and out of home placements, funds for those services are usually exceeded before mid-year. Services provided the remainder of the year are funded with county levy. The Department continued to struggle with higher provider costs and fewer individuals who had access to health insurance. The Department has a collections/repayment policy for individuals who do not have insurance or the ability to pay for mental health and substance abuse services. However, the payment plans are often ignored by the client or the monthly repayment amount is so small that there are limited monies to offset the cost of services each year. Based on experience, those who consistently participate in repayment are less likely to relapse. This may be because they have a vested interest in their own recovery.

The Department finished the year over budget by approximately \$140,000. This amount will be transferred from the Department's Risk Reserve set aside for this purpose. However, if the trend continues, the Department will have a similar issue in 2013 since there was a zero percent increase in the 2013 budget.

In 2013, the Department and its staff will focus on proactive ways to affect positive change for both the Department's clients and its budget. It is hoped that implementation of the JAIS will have a positive effect on youth and families and reduce recidivism by providing the right service at the right time. The Department will be

working in coordination with the Criminal Justice Council to research treatment courts that might be effective for residents of Bayfield County. NIMC will be working on plans to implement the Patient Protection and Affordability Care Act (PPACA) – the federal health care act that is supposed to provide more residents with affordable health insurance. It is hoped that, on January 1, 2014, when the federal market place for health insurance is available and mental health parity is required, that these changes will have a positive affect on the Department's budget and its clients.

The Department and staff has much work to do in the coming years. Staff's commitment to the individuals and families that they work with ensure that the Department will continue to make positive strides to ensure the health and safety of those that we serve.

Each year, I end this summary with a tribute to the people who work to ensure that Human Services are available to the Bayfield County residents who need them. Bayfield County has dedicated staff who genuinely care for those that they serve and who work hard each and every day to enhance the lives of others while treating them with dignity, respect, and kindness. The Management Team supervises and manages staff and advocates on their behalf to provide the ongoing support and the resources that staff needs to provide services. The Human Services Board and Advisory Committees develop policies and provide the oversight that guides the work. The County Board and the County Administrator continue to provide financial support and maintain their interest and dedication to the well-being, health and safety of all of the residents of Bayfield County. Thank you all.

Elizabeth Skulan
Director